ISSUES AND TRENDS

❖ Apart from peace and an absence of insecurity, young people (YP) say formal and non-formal education is the top solution to the problems they face.

❖ YP say education can protect them from abuse. It offers short- and long-term alternatives to soldiering and sexual exploitation, and can provide life-saving information, including about landmines and HIV/AIDS prevention.

❖ Education in emergencies offers YP structure, stability, life skills and hope for the future. It provides them with a sense of purpose, identity and belonging.

❖ Adolescents and youth have more difficulty than younger children accessing education. They bear greater responsibilities and suffer abuses in war that keep them out of school, and education programs do not prioritize them. In 2000, only 50,000, or less than 3 percent, of the world’s teenage refugees, attended school beyond the primary level.

❖ Although most refugee YP need to complete primary school, many do not feel comfortable attending classes with younger children; school schedules also do not accommodate their responsibilities for livelihood and family; and costs are often prohibitive. Accelerated learning programs for adolescents are not yet implemented widely.

❖ YP need vocational and business training that lead to jobs and self-sufficiency.

❖ Girls and female youth have much greater difficulties accessing quality primary and secondary schooling and non-formal education than boys and male youth. Without education, girls are at greater risk of poverty, exploitation and abuse.

❖ Peer education programs too often empower existing youth leaders at the expense of vulnerable and marginalized youth, especially girls, who also need training and opportunities.

❖ Formal education curricula and teaching methodologies often do not meet YP’s need for active, practical learning and livelihood skills; schools lack qualified teachers as well as resources.

❖ Education data systems used in emergencies and post-conflict do not account for YP’s access to, or completion of, education. Assessments are not systematically conducted to identify their specific education needs.

❖ Education can also be and has been used to manipulate and control YP, and without monitoring or protection, schools can be places of violence, abduction and sexual exploitation.

PROMISING PRACTICES

❖ Well-trained peer educators, with input into the messages they convey, are especially effective at reaching out-of-school YP with life-saving and other information.

❖ Educational activities that maintain flexible schedules and provide childcare increase accessibility to girls and adolescent heads of household.

❖ Participatory teaching methodologies help YP develop problem-solving and decision-making skills and increase their self-esteem.

❖ Non-formal education and recreational programs are especially important for adolescents and youth who cannot attend school and provide opportunities for practitioners to identify and reach out to YP who are more marginalized.

❖ Accelerated education programs that condense years of curricula into shorter timeframes help YP catch up with lost primary school years and continue their studies into secondary school.

❖ Girls’ access to education can be increased through community dialogue and awareness building that builds parental and community support for their equal participation.

❖ Girls who have appropriate clothing, sanitary supplies and separate bathrooms in education facilities, as well as protection in school and en route, are more likely to complete their education.
LEARNING FROM EXPERIENCE: ACCELERATED LEARNING IN SIERRA LEONE

Issues: Much of the education infrastructure was devastated during the war in Sierra Leone, and many YP lost years of formal learning. Without jobs or skills training opportunities, some young Sierra Leoneans threatened a return to arms.

Responses: To provide YP alternatives to violence and a path to self-sufficiency, the Norwegian Refugee Council (NRC) developed a “YouPac” program for 14- to 18-year-olds, who had little to no schooling. YouPac provides these adolescents with a 10-month program of literacy, numeracy and life skills to help them become functionally literate and increase their self-reliance and chances of employment. NRC is cooperating with the Forum for African Women Educationalists, ActionAid and young people to adapt the YouPac program to the Sierra Leonean context. NRC is also training primary and lower secondary school teachers, building and rehabilitating schools and assisting returnees and IDPs, including child soldiers, adolescents and war-wounded, through rehabilitation projects. These measures address YP’s immediate and longer-term educational and economic needs by helping them find stability and grounding. YouPac is one of the few adolescent- and youth-specific education in emergencies programs focused on accelerated learning that is being developed and tested. Its outcomes should be further studied and its good practices widely disseminated.

TAKE ACTION

- Disaggregate education data by age, sex, type of education, enrollment, completion, retention/drop-outs; compare this data to the overall population of children, adolescents and youth and their level of education.
- In reconstruction, directly coordinate educational support with youth employment needs and development.
- Initiate programs to increase adolescent and youth completion of primary school or basic education in emergencies, ensuring equal access for girls. Expand YP’s access to secondary education with direct sponsorships; support for accelerated learning, or “catch-up classes”; programs to support their completion of primary school; and construction of self-help schools in camps.
- Actively engage YP in all phases of education assessment, planning, implementation, evaluation and monitoring, identifying their specific education interests and concerns.
- Ensure that education and skills training programs included in DDR are fully resourced, providing YP—especially girls—with immediate alternatives to armed conflict.
- Ensure flexible class schedules and childcare to increase adolescent and youth access to education.
- Provide more school lunches, clothing, sanitary supplies and separate private toilets for girls in education facilities.
- Make educational environments, including the journey to and from school, safe for YP and free from gender-based violence. Work with YP, teachers and community members to develop and institutionalize school guidelines on behavior and safety, a teacher’s code-of-conduct and a complaints procedure for violations against students. Identify adults that YP, especially girls, feel comfortable going to if their rights have been violated.
- Include survival messages within formal and non-formal education curricula and programming to give YP the tools they need to protect themselves.
- Engage YP in peer education activities that allow them to design age- and situation-appropriate messages and outreach materials that reach YP who are particularly marginalized, not just those who are more easily accessible.
- Include life skills among non-formal education activities, such as decision-making, negotiation, communication and critical thinking skills.
- Mentor YP in project planning, needs assessments, budgeting, evaluation, self-assessment and management, negotiation, teamwork and organizational skills.
- Conduct gender awareness and child rights trainings for all teachers, and employ female staff at all levels and as role models for adolescent girls.
- Visit the website of the Inter-Agency Network for Education in Emergencies (www.ineesite.org), which has an Adolescent and Youth Task Team and is leading the development of minimum standards for education in emergencies.
YOUNG PEOPLE’S LIVELIHOOD

ISSUES AND TRENDS

.getDouble

Young people (YP), and especially refugees and IDPs, often take on increased responsibilities to provide for themselves and their families both during and after periods of conflict. Orphans, adolescent heads of household and teen parents bear particularly heavy burdens.

Most refugee girls and boys do not finish primary or secondary school and have few opportunities to learn family trades or vocational skills, which locks them into a perpetual cycle of poverty.

YP who have either completed their formal educations or attained a basic level of education, or who have vocational skills are often challenged to find a market for their skills. Markets are usually weak in refugee and IDP camps, and refugees may not have access to external markets.

Too many YP are sometimes trained in the same skill, which existing markets cannot support, or are trained in skills for which there is no demand. Others lack the tools, start-up capital or basic business skills they need to begin a trade.

Lack of economic opportunity for YP results in serious physical protection problems and increases YP’s vulnerability to manipulation by adults and peers. Without any means of support, YP often join fighting forces to find food. Some become “street children” and others are subjected to harmful physical labor in poor working conditions.

Because refugee and IDP girls’ access to education, skills training and economic opportunities is usually far more restricted than that of boys, they face more consistent protection problems. As a result, girls are often compelled to exchange sex for money and services, and girls often resort to making alcohol to earn money, which, in turn, contributes to increased domestic violence.

Disarmament, demobilization and reintegration (DDR) programs, which include education and skills training opportunities for YP, represent the largest systematic direct livelihood support to YP post-conflict. They serve only a small portion of the need, however.

In post-conflict reconstruction, education and skills training programs are rarely deliberately linked to the short- or long-term employment needs of YP, and reconstruction jobs are not systematically made available to YP.

Some refugee YP return home without the skills to carry out traditional trades, such as farming, but with new skills and interests acquired in diverse education programs in exile.

PROMISING PRACTICES

Small loans, start-up capital and tools often help YP get a business off the ground. However, teaching them basic business skills, such as accounting, how to make a business plan and the value of saving and reinvesting their earnings, helps them set and work toward realistic goals.

Helping YP and their livelihood cooperatives or organizations make connections to development programs provides them with opportunities to access funds dedicated to their support.

When DDR and similar programs provide livelihood opportunities to both demobilizing and other YP, including girls, competition and divisions among YP are minimized and reconciliation is encouraged.

Mentoring YP who have completed skills training courses and providing them with ongoing business planning assistance gives them the added support they need to put their skills to use.

When market surveys to determine short- and long-term labor and skill needs are undertaken and the results systematically shared with youth education planning and livelihood programs, more viable livelihood opportunities for YP will ultimately be generated.
LEARNING FROM EXPERIENCE: NON-FORMAL EDUCATION LINKED TO LIVELIHOOD IN SIERRA LEONE

Issues: Following a bloody, decade-long war, and living in debilitating poverty, YP in Sierra Leone remain uncertain about their futures. Feeling marginalized by decision-makers and with limited access to education, health care or sustainable livelihood, some YP threatened to take up arms again and return to war if commitments to ensure their well-being were not met.

Responses: To address the skills needs of YP and assist them in becoming economically independent, the Youth Reintegration Training and Education for Peace Program (YRTEP) in Sierra Leone initiated a nationwide, non-formal education program for approximately 50,000 former child soldiers and non-combatants ages 15-35. Active in over 2,000 sites, YRTEP combines reintegration orientation and counseling, life-skills training, vocational counseling, agriculture skills development, civic education and functional literacy training for YP. Participants then teach other youth what they have learned. Youth involved in YRTEP have expressed their belief that the program encourages reconciliation, develops leadership skills, and has shown them strong linkages between skills training, reintegration and academic and social support. YRTEP youth also said that they needed more guidance in using their new skills for further livelihood development, and that attempts by aid agencies and NGOs to empower them with skills training in the absence of realistic job opportunities added to their sense of powerlessness. For their part, aid agencies often feel incapable of having any meaningful impact on a post-conflict economy. World Vision and YRTEP’s funder, the Office of Transition Initiatives /USAID, have responded to this challenge with a Skills Training and Employment Promotion (STEP) program that focuses not only on skills development, but also works to increase employment opportunities through cooperation with local businesses. Taking steps to provide connections between skills training and lasting jobs is helping to build trust and hope among YP. Assisting both former soldiers and other YP is also helping to support the reconciliation needed to achieve lasting peace.

TAKE ACTION

- Conduct market surveys and surveys of youth employment needs, and use them to design complementary livelihood and education programs for YP that lead to viable employment. Be prepared to convince YP to try new subjects and vocations.
- Support the livelihoods of YP and their families with loans and start-up capital, including seeds and tools. Combine this support with business skills training to help them plan their work, and mentor them as they progress.
- Develop holistic approaches to supporting the livelihood of all young people affected by armed conflict, not strictly former combatants.
- Engage YP in post-conflict reconstruction activities, ensuring their access to employment opportunities.
- Provide vocational and skills training to YP, ensuring equal access to girls. Be prepared to engage girls and parents in considering non-traditional occupations for girls to expand their opportunities and address community employment needs.
- Work with local governments and development groups to ensure they invest in the capacity-building of YP. Ensure that development projects engage YP in implementing economic development programs.
- Help adolescents complete primary and secondary education by securing scholarships and setting up self-help schools. Provide school lunches or other incentives to increase girls’ enrollment and rates of completion.


### Issues and Trends

- Young people (YP) affected by armed conflict, especially girls, have urgent reproductive health (RH) concerns as they are subject to gender-based violence (GBV) and may become sexually active at younger ages amid social upheaval.
- Key RH problems include: early and unplanned pregnancy; complications in pregnancy and delivery; maternal mortality; sexually transmitted infections (STIs), including HIV/AIDS; unsafe abortions; GBV, including rape, forced marriage, sexual enslavement and sexual exploitation; and genital mutilation.
- Girls under 18 face a high risk of complications during pregnancy and delivery. In developing countries, maternal mortality is five times higher among girls under 18 than among women 18-25, and armed conflict increases these risks.
- YP have few sources of accurate information about sexual health due to the breakdown of social, education and health systems and strong social taboos against discussing sex. Parents are often as ill-informed about RH and sexuality issues as their children, and most YP rely on the uninformed advice of peers when making decisions that affect their RH.
- In some cultures, the idea of consensual sex is unfamiliar, and girls are not empowered to make choices about sex and relationships.
- YP are often not aware of and do not have access to existing health services in emergencies and post-conflict, pointing to major gaps in outreach efforts to YP by health providers.
- The Reproductive Health Response in Conflict (RHRC) Consortium has expanded RH programs with YP, but services are not yet systematically provided in emergencies and post-conflict. YP’s RH programs are still often treated as sub-components of RH services for adults, and outreach to YP is limited.
- Data on YP’s health, including RH, and good program practices are not routinely collected, and often do not distinguish between differences in the situations of younger adolescents and older youth.
- Increased program attention to the RH rights and responsibilities of boys and male youth is needed, including efforts to strengthen their partnership roles in securing the RH rights of girls and female youth.
- Although YP consistently express strong interest in knowing their RH rights and doing more to protect them, their participation in the design, monitoring and evaluation of RH programs is limited.
- YP and RH practitioners do not effectively measure the extent to which awareness-raising, life skills and peer-to-peer approaches achieve behavioral change or identify what factors are most important in different contexts. Many girls say that even with RH information, without education or economic alternatives, they are still forced into early marriages or to exchange sex for money, goods or services.

### Promising Practices

- YP define “adolescent-” or “youth-friendly” health clinics in conflict-affected communities as those with comfortable, clean and well-equipped facilities, and competent, welcoming, non-judgmental staff who provide confidential services, including prevention information and treatment for free or at very low cost.
- Disseminating RH information to YP by including it in school curricula, or via other education programs is an efficient way of transmitting RH information to YP.
- Peer-to-peer outreach strategies and youth-run radio shows are particularly effective in reaching marginalized, out-of-school YP with RH messages and information about services. Affordable videos with RH messages in native languages are scarce and require facilities for viewing, but are potentially strong tools for reaching illiterate YP.
- Awareness-raising and the development of life skills that allow YP to make informed decisions, negotiate sex and communicate their concerns and needs are proven first steps in preventing GBV, the spread of STIs, unplanned pregnancy and other RH problems.
- Involving YP in all stages of RH projects, including assessment, design, implementation, monitoring and evaluation, increases the likelihood of project relevance and success and supports meaningful activity for YP during periods of turmoil. YP need capacity-building through technical guidance and financial support to do this.
- Youth-friendly recreational spaces provide YP with places to gather, obtain and discuss RH information and services.
- RH training and information materials developed with YP and adults that respond to local cultural norms and are written in native languages increase the effectiveness of YP’s RH programs.
- Teaching adults about RH and involving them in YP’s RH projects builds community support for the fulfillment of YP’s RH rights and transforms cultural taboos that limit action.
- Once sensitized, many boys are extremely supportive of girls’ RH rights and work to encourage gender equality and improved support for girls.
LEARNING FROM EXPERIENCE: NORTHERN UGANDA — PEER-TO-PEER OUTREACH INCREASES RH KNOWLEDGE

Issues: Few YP who were surveyed knew much about RH and described many abuses they suffered in the war making them vulnerable to RH problems. Without jobs, education, humanitarian assistance or protection, girls were raped and sexually exploited by military and other men in their communities. Others were abducted and sexually enslaved by the Lord’s Resistance Army rebel group. Some were also pressured into early marriages or to engage in sexual relations before they were ready. Although some RH health services were available to YP, YP were unaware of them or felt too uncomfortable to use them.

Responses: Some of the young people involved in adolescent-led research and advocacy with the Women’s Commission in Gulu, northern Uganda, became so concerned about RH issues that they formed Gulu Youth for Action (GYFA). Part of GYFA’s mission is to increase awareness and communication about RH problems among young people, including in IDP camps. GYFA members reached out to their peers through friendly educational meetings, radio broadcasts and drama. They worked closely with government officials, the Department of Health and local NGOs to conduct training of trainers workshops and to ensure YP’s access to learning materials. GYFA says that fostering discussions among girls is a major measure of success because girls are socialized not to express their concerns. Although it has improved relationships between youth and adult officials, GYFA remains frustrated by the lack of political will necessary to take further action and address the root causes of RH problems in YP’s lives, including armed conflict and gender discrimination. GYFA is working to increase youth advocacy efforts for societal change and to improve the evaluation of its programs.

REPRODUCTIVE HEALTH FOR YOUNG PEOPLE

YOUNG PEOPLE’S BASIC REPRODUCTIVE HEALTH NEEDS

- Information on sexuality and reproductive health, including HIV/AIDS
- Information on unsafe abortion prevention and post-abortion care
- Access to family planning services
- Antenatal, safe delivery and postpartum care
- Easily accessible facilities, located close to home in safe, comfortable settings
- Prevention, diagnosis and treatment of STIs
- Competent, same-sex providers who are friendly, welcoming, non-judgmental and respect confidentiality
- Free or low-cost services
- Protection from GBV and services for survivors
- Participation in RH program decision-making and implementation
- Community and adult support

TAKE ACTION

- Involve YP in the design, implementation and evaluation of RH programs at every phase of conflict, not solely as sub-components of adult RH work.
- Ensure female adolescents and youth are included in emergency RH responses, including the provision of the Minimum Initial Service Package (MISP) to provide care for survivors of sexual violence, prevent the transmission of HIV/AIDS and prevent maternal illness and death.
- Identify the number of YP who do and do not access community and institutional health services, assess the nature of their needs and develop institutional protocols for collecting data disaggregated by age and sex.
- Assess the knowledge, attitudes and practices of YP on RH and other health issues, and identify their sources of information about RH. Develop new creative ways to evaluate behavioral change with young people as key partners.
- Conduct situational analyses with YP, and identify protective supports in their lives, such as parents and schooling, as well as gaps and risks, such as sexual violence and exploitation, early marriage, abduction, forced recruitment and domestic violence; and social taboos concerning YP’s sexuality and separation from family.
- Train security, humanitarian and peacekeeping personnel in gender and child rights issues; educate them about how their work affects the RH of young people, whether it be water and sanitation, education, shelter construction, health care or physical security; implement multi-sectoral approaches to protect the RH rights of YP.
- The RHRC Consortium, UN agencies and other local and international practitioners should increase coordination of RH initiatives for YP across sectors in emergencies and post-conflict, eliminating duplication and maximizing linkages.
- Increase provision of and training in the use of free or low-cost condoms to YP in supportive environments.
- Teach parents and community leaders about RH to increase community support for YP’s RH education and services.
- Teach girls and boys that they share responsibility for family planning choices, emphasizing girls’ right to insist on condom usage, to time pregnancies and to refuse sex.
- Support YP’s initiatives, such as youth centers, youth newspapers, radio shows, recreation, creative projects and advocacy groups, integrating health awareness and good practice; and support their leadership in RH programming.
ISSUES AND TRENDS

-more than half of all new HIV infections worldwide occur among people aged 15 to 24. During conflict, many adolescents and youth face additional risks due to increased sexual violence and exploitation, poverty, alcohol and drug abuse, and sexual activity without prevention education. Girls are particularly at risk.

-as schools and social support structures are destroyed, young people (YP) are less able to access information and develop the skills needed to negotiate safer sex, including condom use, delaying their first sexual encounter or limiting the frequency of sexual contact.

-international humanitarian and peacekeeping personnel at times rape or have sex with YP in exchange for money or services, increasing the risk of HIV and other STIs and unplanned pregnancy. Policies prohibiting these acts are not uniform and are poorly enforced.

-HIV programs sometimes exclude or do not holistically support YP by setting inflexible age requirements. For example, UNAIDS defines children orphaned by AIDS as under 15 years old, thereby limiting support to older adolescents heading households.

-HIV and gender-based violence (GBV) programs are often implemented separately and with limited attention to YP, thereby missing opportunities to identify, treat and prevent HIV infection among YP.

-Most voluntary counseling and testing (VCT) services do not offer effective treatment options in emergencies or post-conflict, and many YP are afraid to face the disease without support or hope for the future.

PROMISING PRACTICES

-YP’s risk of exposure to HIV is reduced when peacekeepers and humanitarian aid workers receive HIV prevention information and when strict policies are enforced to hold them accountable for sexual violence and exploitation.

-Including health care in confidential GBV services to young survivors provides opportunities to determine HIV status and offer prevention information.

-Education and economic opportunity for YP are essential alternatives to sex for money or other risky behavior that increases HIV risk.

-Safe, fun social spaces for adolescents and youth help reduce secretive sexual encounters and are venues for youth-led HIV/AIDS education.

-YP who learn life skills, including communication and negotiation skills, are more capable of making decisions that protect themselves from HIV.

-Involving YP in designing and implementing HIV/AIDS prevention and care programs increases access to services for more marginalized YP as well as the likelihood of behavioral change.

-HIV programs that provide support to both YP and those who care for them are more successful.

-HIV programs that encourage YP to delay their first sexual experience reduce their risk of exposure.
LEARNING FROM EXPERIENCE: THAILAND—ADULT-YOUTH COMMUNITY PARTNERSHIP FOR HIV PREVENTION AMONG YOUTH

Issues: Refugee young people from Burma living in camps inside the Thai border had no access to information about the AIDS pandemic and the threats it posed to their lives. The Karen refugee community was conservative, mostly Baptist; adults gave young people limited guidance about sex and even burned condoms and educational materials about HIV/AIDS. At the same time, refugees regularly migrated in and out of the camps in search of work. Public messages were in Thai, which refugee young people could not understand.

Responses: Two concerned Karen refugee women formed the Karen Education Working Group (KEWG) to increase HIV/AIDS prevention efforts and access to reproductive services, especially for women. They learned about the Thai Youth AIDS Prevention Project (TYAP), whose mission was to create leadership opportunities for youth by working to reduce the impact of the AIDS pandemic. TYAP joined with KEWG and started training programs to help Karen community-based organizations plan and implement reproductive health programs for youth. Training manuals were translated into the Karen language and have been used to help CBOs reach hundreds of young people in camps, towns and safe houses in Thailand. All TYAP programs were peer-led. Young people defined risky behavior and took steps to involve their entire communities in culturally appropriate education programs that dramatically increased knowledge about HIV prevention.

TAKE ACTION

- Include HIV information in education activities.
- Determine and enforce strict policies preventing sexual abuse and exploitation of YP by members of your staff or group, and provide staff with child rights and HIV information.
- Coordinate GBV and HIV services, and provide confidential voluntary HIV testing and counseling to GBV survivors.
- Provide YP, especially girls, with economic alternatives to exchanges of sex for goods and services through skills training and apprenticeships.
- Create safe spaces and culturally appropriate social mixers for YP, and include youth-led HIV education campaigns.
- Use life skills approaches in all HIV campaigns with YP.
- Support adolescent and youth leadership in HIV assessments and program design, implementation and evaluation.
- Ensure adolescents have access to VCT and post-exposure prophylaxis (PEP) services and that pregnant adolescent girls are fully included in programs for Prevention of Mother-to-Child Transmission of HIV. Where legal, Minimum Initial Service Packages, known as “MISP kits,” including emergency contraception, should be made available to survivors, as well as PEP to prevent transmission of HIV immediately after exposure.

www.womenscommission.org
GENDER-BASED VIOLENCE AGAINST YOUNG PEOPLE

ISSUES AND TRENDS

Definition: Gender-based violence (GBV) encompasses a range of acts of violence committed against females because they are females and against males because they are males, based on how a particular society assigns and views roles and expectations for these people. (B. Vann, 2002.)

 Lyons, 2002.)

- Among children, adolescent girls suffer GBV disproportionately in armed conflict. Violations against girls include rape and sexual assault (at times used as a weapon of war); sexual slavery; forced pregnancy; forced marriage; sexual exploitation; trafficking for sexual purposes; and domestic violence.
- Adolescent girls who have survived GBV consistently prioritize education, job opportunities and health care to ensure their protection and recovery.
- Boys also suffer GBV and are raped, sexually assaulted, trafficked for sexual purposes and sexually enslaved. Less is known about GBV against boys, and these incidents are investigated less.
- Strong social stigmas attached to GBV dissuade both girls and boys from speaking out about their GBV experiences and seeking assistance. Social taboos, particularly concerning homosexuality, often make getting help even harder for boys than girls. Young people (YP) also have little incentive to seek help, as few support systems are in place to protect and assist them if they come forward, and often little is done to punish perpetrators.
- GBV perpetrators are predominantly males, including fighting forces, peacekeeping troops, humanitarian personnel, and family and community members—both adolescents and adults.
- GBV against girls is directly linked to lack of physical protection; lack of humanitarian assistance that compels many girls to exchange sex for food and other services; gender discrimination that limits girls’ fulfillment of their rights, including to education and livelihood opportunities; weak social and legal protections resulting in widespread impunity for GBV crimes—girls are at times married off to perpetrators to resolve cases of GBV.
- Because laws often prioritize parental rights to make decisions regarding the welfare of their children, adolescents may have limited control over legal decisions or remedies pertaining to GBV abuses they suffer.
- GBV programs are increasing in number, and many assist both adult women and adolescent girls. More needs to be done, however, to expand access, including to younger adolescents, and regularize GBV programs during emergencies and post-conflict.
- GBV programs are also not sufficiently linked to other youth-focused sectoral responses, including children’s, psychosocial and education programs. Stronger links with voluntary counseling and testing (VCT) programs for STIs, including HIV/AIDS and other health problems, will create opportunities to counsel and assist GBV survivors.

PROMISING PRACTICES

- GBV programs that involve YP in their design are more likely to address the dynamics and realities YP face and to include “youth-friendly” and peer-to-peer approaches that ensure YP benefit from the outreach.
- GBV programs that use education, psychosocial and other youth-focused programs to spread GBV information can reach large numbers of YP.
- Assistance programs are more likely to attract GBV survivors if they minimize participants’ exposure to public shame and retribution. Sometimes beginning with group activities that appear unrelated to GBV creates opportunities for discreet individualized care.
- Engaging YP of relatively the same age group in GBV program activities can increase adolescents’ involvement and program effectiveness.
- Once aware, many boys are strong advocates for gender equality and ending GBV. Involving boys, including the leaders among them, in GBV awareness activities with their peers places greater responsibility on boys and men to end GBV.
- Decreasing impunity and increasing accountability for GBV also increases male responsibility for GBV prevention and creates incentives for survivors to come forward.
- New tools, standards and procedures have been developed to help prevent, expose and punish GBV in humanitarian crises. The UN Inter-agency Standing Committee developed six core principles on protection from sexual exploitation and abuse, which have been incorporated into the Codes of Conduct of many international agencies.
- Because girls and women know where and when they are most vulnerable to attack, working closely with them on the design of camps and implementation of services can help ensure their protection from GBV.
- Providing safe shelters, counseling and access to free legal services for YP increases their chances of successfully pursuing legal remedies for GBV.
- Providing skills training and income-generation opportunities to adolescent girls and their families reduces economic pressures that lead to early marriages and sexual exploitation.
- For GBV programs serving adolescents to be successful, the entire community must be engaged through awareness-raising campaigns that explain the GBV problems adolescents face.
- Youth centers play a strong role in reaching out to out-of-school YP with GBV support, via contact through sports and other recreational activities.
LEARNING FROM EXPERIENCE: TANZANIA—ENDING IMPUNITY THROUGH COORDINATED MONITORING AND REPORTING

Issues: In refugee camps in Tanzania, adolescents from Burundi reported that sexual exploitation by teachers was common despite international prohibitions.

Responses: To end GBV throughout the Kibondo camps, the International Rescue Committee cooperated with various community services NGOs to launch a GBV program to reach in-school and out-of-school youth. Youth centers collaborated with teachers to create a system of monitoring, reporting and follow-up. Teachers in each school acted as focal points for GBV issues. Youth center staff reported on issues arising among out-of-school youth. Monthly camp meetings were conducted to resolve issues that were brought forth by both groups. This cooperative strategy of standardized reporting also involved regular reports being made to UNHCR and the police, and at times resulted in perpetrators being sent to jail. Project participants described strengths in the roles of youth centers in reaching out-of-school youth. They said it was relatively easy to reach out-of-school youth through youth centers because these boys and girls often went there to participate in sports and other recreational activities. Youth center staff and peers were able to engage them in GBV discussion groups, which identified key services needed. Girls’ discussions often included issues surrounding the incidence and outcomes of rape, problems related to HIV/AIDS, and sexuality and tradition, such as early and forced marriage and domestic violence. In response to some of these issues, the youth centers linked to health service providers and offered VCT for STIs, including HIV/AIDS, and family planning services. Health education messages were also often distributed to young people in the centers, and vocational classes such as sewing were conducted.

TAKE ACTION

- Adopt, implement and enforce a Code of Conduct for and within your organization which includes the six Core Principles on Protection from Sexual Exploitation and Abuse developed by the Inter-agency Standing Committee.
- Use new tools and guidelines developed on GBV prevention and response in humanitarian crises. (See the Reproductive Health Response in Conflict website under GBV for a bibliography of resources, including a GBV Tools Manual, www.rhrc.org.) Recommendations for services to adults may be adapted for adolescents through situational analysis and work with YP on program design and implementation.
- Work with YP to design and implement GBV programs to ensure they address YP’s priorities and that they will be fully accessible to YP. As much as possible, engage supportive community adults in this work with YP.
- Ensure that GBV survivors have access to education, livelihood opportunities and health care.
- Research national and customary laws on parental consent, confidentiality, rape and other forms of GBV to anticipate any challenges in the provision of services and confidentiality your program might face. Be clear on the range of risks YP may face in coming forward for assistance before outreach begins, and work with YP and community members to determine appropriate responses.
- Implement public awareness campaigns and engage the entire community regarding the needs of adolescents to ensure GBV is not perpetuated and services for survivors are not undermined. Work closely with youth and women’s groups to strengthen their leadership in conducting this outreach.
- Ensure that GBV public outreach campaigns convey messages that reduce stigmatization and blame of survivors and legitimize the support they need.
- Work directly with caregivers to educate them about the needs and rights of the adolescent GBV survivors they care for.
- Counsel YP and their caregivers regarding legal remedies to GBV, and facilitate their access to legal services and physical protection, including shelters. Advocate for strong laws and/or the enforcement of existing laws that protect YP and others from GBV.
- Work with boys and men to increase their awareness of GBV and identify solutions; support their actions with girls and women to increase responsibility among males to end GBV and promote gender equality.
- Link GBV services to services provided in other sectors of humanitarian response, especially children’s, education, psychosocial and health programs, including VCT for HIV/AIDS services. Where legal, Minimum Initial Service Packages, known as “MISP kits,” including emergency contraception, should be made available to survivors, as well as post-exposure prophylaxis (PEP) to prevent transmission of HIV immediately after exposure.
ADOLESCENT-HEADED HOUSEHOLDS

ISSUES AND TRENDS

- Hundreds of thousands of adolescents have become solely responsible for themselves and their siblings in communities affected by armed conflict when parents and adult caretakers were killed, went missing or died of disease, including AIDS. The majority of these adolescent-headed households (AHHs) are led by girls.
- Adolescents heading households often have more difficulty than other young people (YP) accessing education and care because of financial and family responsibilities.
- Without shelter or caretakers, young people in AHHs are sometimes forcibly separated, pushed into orphanages, domestic service or left to live on the street.
- Without skills or jobs, girls in AHHs are especially at risk of sexual violence and exploitation, early marriage and related health problems.
- Many AHHs receive skills training and loans, but limited legal assistance, if any. By law or local custom, many have no rights to family land or other property, or cannot enforce them. Girls especially need advocates to ensure their right to inherit.
- AHHs are often not targeted for assistance because communities do not always view YP heading households alone as needing special support. AHHs often feel hopeless and isolated within their communities, without full rights to participate in decision-making or other activities.
- When whole communities of AHH, as in Rwanda, are without adult support and guidance, young people need spaces to discuss their concerns, support one another and re-conceptualize acceptable social norms.
- AHHs at times have adult relatives who can be traced; once found, they often demand additional assistance to care for the YP. YP, in turn, have few choices about staying with the relative and little control over the assistance provided.

PROMISING PRACTICES

- When aid groups work closely with youth groups or other networks of YP, they can better identify AHHs and determine program approaches that address cultural barriers to care.
- Programs for AHH that combine formal education or skills training with income-generation support, including credit, tools and technical advice, increase self-sufficiency among AHHs.
- Ensuring jobs and income for AHHs helps ensure siblings are able to attend and complete school and protects girls from sexual exploitation and violence.
- Providing child-care assistance to adolescent heads of household allows them to go to school or work with less worry over the safety of their siblings.
- If AHHs are reunified with adult relatives, support should not be provided solely to the adult caregiver. Holistic support, including education enhancements for YP, helps YP to be fully engaged in ensuring their own well-being and reduces risks of exploitation.
LEARNING FROM EXPERIENCE: RWANDA — ECONOMIC AND EDUCATION SUPPORT FOR AHHs MUST BE COMBINED WITH ADVOCACY

Issues: In the aftermath of the Rwandan genocide, more than 300,000 young people lived in approximately 60,000 parentless households, and girls headed three out of every four of these households. These young families were the most marginalized of the poor and at the greatest risk of a range of rights violations—from homelessness and malnutrition to violence and legal disenfranchisement. Despite their vast numbers, many of these AHHs were invisible and isolated, living in rural areas, unacknowledged or scorned by their own communities and extended families. Girls had no rights to family lands and boys had difficulty enforcing their rights.

Responses: Several organizations, including UNICEF, World Vision and Church World Service, began working with local NGOs to provide AHHs with vocational training, support for farming cooperatives, school fees, educational supplies and small enterprise assistance. These measures addressed important immediate and longer-term health and economic issues, but not enough was done to improve their status within the community. Many of the YP who were not in a position to protect themselves well in AHHs are now in their 20s and can work with NGOs and others to increase recognition of the unique concerns of AHHs. AHHs continue to need support in asserting their opinions and pursuing the fulfillment of their rights, including the right to own and inherit property, which is now guaranteed by law for girls, but not regularly enforced.

TAKE ACTION

- Involve YP and caring adults in identifying AHHs and designing, implementing and evaluating projects that support AHH rights.
- Support AHHs in creating peer associations that advocate for their rights; monitor their protection; organize psychosocial, educational and other activities; and collaborate with YP in families with adult caregivers to reduce AHH isolation.
- Support community sensitization programs that strengthen AHH relationships with community adults and peers.
- Organize pro bono legal support for AHH and advocate the enforcement of laws that ensure their property rights, especially girls’.
- Organize childcare programs ensuring the security of younger siblings while AHHs are in school or at work.
- Provide safe houses and confidential health and psychological support for girls in AHHs suffering sexual violence and exploitation.
- Build educational programs into AHH work environments and institute flexible education schedules.
- Conduct broader family search programs for AHHs, incorporating cultural definitions of extended family, and conduct follow-up monitoring.
**ISSUES AND TRENDS**

**Definition:** Separated children and adolescents are considered to be under the age of 18 and separated from both parents, or from their previous legal or customary primary caregiver. Some can still be considered separated even if accompanied by other adult family members.

- Adolescents are often forcibly separated from family members or caregivers during armed conflict as they flee their homes, move from camp to camp or are recruited into fighting forces. Some become “street kids,” others separate voluntarily, and some seek schooling away from home.

- Social and cultural norms sometimes make it difficult to identify separated adolescents in some communities; adolescents under 18 might be considered adults or able to care for themselves, when, in fact, they still need assistance.

- Many separated adolescents lack trust in adults and/or want to control their own lives. They resist adult care although they often greatly need adult guidance, support and protection.

- Most separated adolescents need help tracing and reuniting with their families, or finding alternative care. At the same time, it is much harder to find foster families for adolescents (particularly boys) than for young children.

- While community-based care—such as foster or group homes—provides alternatives to institutionalization or life on the street, girls in these situations are at particular risk of targeted abuse and exploitation by males.

- Separated adolescents are particularly at risk of GBV, recruitment into fighting forces and harmful forms of labor, and need targeted protection from exploitation and abuse in camps and other settings. Some may abuse alcohol and drugs.

- Separated girls who have been raped and/or have had children need help securing acceptance by their families and communities when they return home.

- Adolescents have limited say in determining their own care. Humanitarian workers are often responsible for making quick determinations about adolescents’ “best interests,” and laws may put the rights of parents above those of adolescents.

**PROMISING PRACTICES**

- Providing comprehensive services to separated adolescents while their families are traced or while in long-term care helps protect them from harm and prepares them for adulthood. Services should include: psychosocial support; formal and non-formal education, including life skills; job training; recreation; and medical care and counseling—especially for survivors of GBV.

- Education and skills training provide separated adolescents with concrete alternatives to military recruitment and sexual exploitation and increases their ability to provide for themselves.

- Taking adolescents’ opinions and feelings into consideration when determining appropriate care options helps ensure that they do not enter into abusive situations.

- Adolescents who resist adult care sometimes develop relationships with older youth mentors and caregivers, e.g., a “sister” or a “godfather,” and benefit from their support.

- Monitoring the care of separated adolescents in a variety of settings—including foster and group homes—to ensure they have access to food and are not sexually abused or exploited, improves overall security and well-being.

- Using the Child Connect database developed by IRC facilitates information sharing among agencies about separated children and adolescents, and speeds tracing and reunification.

- Using video cameras to facilitate communication between separated adolescents and their families prior to reunification eases anxieties about returning home post-conflict.
LEARNING FROM EXPERIENCE: SIERRA LEONE—VIDEO SMOOTHES THE WAY TO REUNIFICATION

Issues: After the war ended in Sierra Leone, many of the thousands of adolescent girls who had been abducted and sexually enslaved by fighting forces desperately wanted to return home, but were afraid of being ostracized by their families and communities because of their experiences.

Responses: The International Rescue Committee (IRC) in Sierra Leone responded to the particular concerns of these adolescent girls by launching a video reunification project. Once parents had been traced, girls and their parents would exchange videotaped messages to smooth the path to reunification. Parents sent messages of reassurance to their daughters, expressing how much they wanted them to return home even though their lives had changed, and even if they returned with children born during their captivity. The direct visual and audio contact afforded by the videotaped messages greatly reduced girls’ fears of being rejected upon returning home. This form of communication was more powerful than letters or photographs, and inspired greater hope for successful reintegration. It gave girls more confidence and a stronger voice in their own reintegration. They had an opportunity to safely communicate with their families, making their transition home less traumatic. Reunification was at times followed by traditional ceremonies, which supported reintegration as a community healing process.

TAKE ACTION

- Identify and register separated adolescents, making sure to consult YP and community members about local definitions of adulthood, and the difference between “separated” and “orphaned.”
- Include separated and other adolescents in the design and implementation of reintegration programs, and on community teams that monitor separated adolescents’ protection and access to humanitarian aid.
- Provide comprehensive services, as described above, to separated adolescents, taking care to ensure medical care, psychological support and job skills training for GBV survivors.
- Ask adolescents, directly or through counselors, their opinions and feelings about their care, and address their concerns when making decisions on their behalf.
- Work creatively with adolescents and key community members to identify alternative forms of care—including foster care, group homes and care by other adults—when family cannot be traced or when adolescents resist assistance.
- Facilitate peer support networks between separated adolescents.
- Use the Child Connect database to facilitate tracing and reunification of adolescents with family and caregivers.

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ISSUES AND TRENDS

- An estimated 300,000 children under 18—most of them adolescents—are involved in fighting forces around the world.
- Young people (YP) enter fighting forces for diverse reasons—many are abducted and forced, some are compelled to “volunteer” when they have few alternatives for care, and others are convinced of a cause and join willingly.
- YP play diverse roles in government, rebel and other fighting forces. They are armed combatants, porters, cooks, spies and more. Many are involved in committing atrocities, looting and other acts of violence and are also victims of violence. Girls play all of these roles and are often used as sexual slaves, raped, and at times forced to bear children in captivity. Many are at high risk of contracting STIs, including HIV/AIDS.
- Research and experience shows that although YP’s reintegration needs vary greatly across conflicts, at least three elements are common to successful reintegration of YP in all circumstances: sustained family and/or community acceptance; YP’s ability to establish a solid identity; and YP having meaningful roles or purpose that is accepted in the community. (de la Soudière, 2003.)
- Although girls have comprised up to 50 percent of some fighting forces, the diverse roles they play are not always recognized, and they are frequently overlooked in formal demobilization programs. Without support, some are forced to remain with their captors or turn to prostitution to survive, which has occurred in Sierra Leone.
- Global awareness of the problem of child and adolescent soldiering has increased, and governments are signing on to an Optional Protocol to the Convention on the Rights of the Child to prevent their recruitment. In addition, increased support must be given to humanitarian and development programs that alleviate conditions leading to YP’s involvement in conflict and improve disarmament, demobilization and reintegration (DDR) programs for YP.
- Many adolescent soldiers have missed years of schooling and consistently say that education, skills training and jobs are top priorities for their successful reintegration.
- Many government donors funding military or development initiatives in countries at war do not adequately monitor the use of such aid, allowing for the active recruitment of YP into fighting forces.

PROMISING PRACTICES

- Approaching reintegration holistically and providing services that benefit both former adolescent soldiers and other YP eases tension and competition between them and helps improve the situation of all YP to reduce soldiering.
- The rapid provision of education and job training to demobilizing adolescent soldiers helps establish peace and security by offering concrete alternatives to armed conflict and opportunities to develop new identities and roles that are acceptable to the YP and society.
- Providing YP physical security, education and livelihood alternatives also helps prevent their re-abduction or coercion into fighting forces.
- Not all YP who are part of fighting forces register or qualify for formal DDR programs, but they still need services. Setting up parallel programs that anticipate and bridge such gaps, often affecting girls, creates the flexibility needed to rapidly address a diversity of needs not covered under formal DDR.
- Keeping promises to former soldiers by fully funding programs that support them helps build trust and prevents their return to soldiering.
- Efforts to support the active involvement of parents, teachers, public officials and the community at large in the reintegration process are crucial to the acceptance and sustainable reintegration of demobilizing YP.
- Providing psychosocial counseling to demobilizing adolescent soldiers before and after they return to their communities helps them deal with their fears and concerns about their experiences in conflict, reuniting with family and beginning life anew. Some will need ongoing counseling or more specialized medical care.
- Supporting traditional rituals that cleanse YP of their experiences in conflict and foster conflict transformation and community acceptance helps both individual and community healing and reinforces community involvement in YP's care.
- Peer support is essential to successful reintegration. Engaging YP who have already had positive reintegration experiences in helping with newly reintegrating YP provides them with a strong peer network and healing, leadership, and community-building opportunities.
- Providing comprehensive reproductive health services to girls leaving fighting forces helps secure their reintegration and avoid further sexual violence and exploitation. Programs that engage parents and community members in ensuring their acceptance help minimize their stigmatization or rejection. Support is also often needed to help girls safely leave their “bush husbands.”
LEARNING FROM EXPERIENCE: AFGHANISTAN — COMMUNITIES WORK TO REINTEGRATE YP

Issues: After decades of war, national efforts to demobilize fighting forces have recently created opportunities for many young people to return home from fighting forces in Afghanistan, but children and adolescents remain at risk of recruitment, including by the Northern Alliance, the Taliban and other groups.

Responses: In the northeastern provinces of Kunduz, Takhar and Badakshan, YP and adult community members are taking a holistic approach to the reintegration and protection of all YP with assistance from Child Fund Afghanistan and Christian Children’s Fund through the Child Protection and Reintegration of Children Affected by Armed Conflict in Northeastern Afghanistan project. With the approval of rural village shuras (councils), male and female teenagers and adults worked to form Child Well-being Committees (CWBCs). According to gender norms, women and men have separate CWBCs that include girls and boys. They work collaboratively to map and implement plans to address risks facing vulnerable YP, such as orphans, girls, disabled children, working children and former child and adolescent soldiers. The CWBCs work directly with women’s groups, youth groups and religious and other community leaders.

In 2003, the project began to assist in the reintegration of approximately 2,500 children (mainly 14- to 18-year-olds) associated with fighting forces who had been officially demobilized, as well as significant numbers of children who did not participate in the official demobilization but who were reentering civilian life. To prevent further recruitment, the CWBCs monitor recruitment at village level and channel information into a regional database that can be used by the government and other agencies in efforts to build peace and protect children's rights.

The CWBCs community-based approach, allowing community leaders and YP strong ownership and leadership in the process and outcomes, has ensured the commitment needed for YP’s successful reintegration. By addressing many facets of YP’s lives and setting up collaborative systems for monitoring and action, locally and regionally, CWBCs also strongly address prevention.

TAKE ACTION

☐ Include provisions for the care and community roles of YP in peace agreements. Reduce stigmatization of former soldiers by taking a holistic approach to DDR, ensuring that support is available to all YP affected by armed conflict—those formerly with fighting forces and those not.

☐ Ensure DDR programs are fully funded and include medical care, family tracing and reunification and interim care, and psychosocial, education and livelihood support. Provide YP with “DDR kits,” including non-food items, tools for livelihood and gifts they can give their families upon return, and support their reintegration with ongoing counseling and community support.

☐ Ensure medical care includes voluntary counseling and testing (VCT) for STIs, including HIV/AIDS, and provide YP with links to confidential health services.

☐ Ensure girls are fully addressed in DDR planning and implementation, offering them full services, plus comprehensive and confidential GBV services, including counseling, clinical care (including emergency contraception), obstetric and gynecological care and protection from ongoing sexual violence and exploitation.

☐ Support community mobilization that promotes the acceptance of reintegrating YP, and provide parents and other community members with skills and support needed to identify and address concerns the YP and community members have and problems they will encounter.

☐ Support locally established methods that foster reintegration, including traditional rituals such as cleansing ceremonies, as part of DDR and local justice, healing and conflict transformation methods.

☐ Involve YP in designing and implementing DDR programs, including as mentors for newly demobilizing YP, and in creating peer support networks and opportunities that promote YP’s constructive community participation and leadership.

Some of The Risks Facing Female Adolescent Soldiers

- Armed combat and other forced labor
- Rape and sexual assault
- Sexual slavery or “bush marriages”
- Dangerous pregnancies and bearing children conceived of sexual abuse
- Stigmatization and rejection by family and communities and loss of ability to marry
- Potentially high risk of STIs, including HIV/AIDS
- Exclusion from DDR programs and few options for care
- Fewer education and livelihood opportunities than male counterparts despite socio-economic burdens
- Poverty and continued sexual abuse and exploitation following armed conflict

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ISSUES & TRENDS

❖ The creation of adolescent- and youth-friendly spaces and activities in all phases of emergencies is essential to the psychosocial well-being and protection of YP. When organized well, they provide alternatives to idleness and hopelessness, helping YP avoid recruitment into fighting forces, sexual violence, depression, drug abuse, teen pregnancy and other risks.

❖ “Child-Friendly Spaces” (CFS) are an attempt to integrate fundamental services in health, primary education, childhood development, child care and psychosocial development into a single protective environment that is both family-focused and community-based. This approach promotes the rights of refugee and internally displaced children. Centers set up as part of the CFS approach provide a safe, friendly space for children where they can engage in structured recreational and educational activities, as well as have access to primary health and nutrition services.

❖ CFSs can easily be budgeted and planned for in camp and other settings, but should not be the only safe space response.

❖ Although CFS can involve girls and boys of all ages, they have not consistently addressed the distinct needs of adolescents and youth. For example, space allotted for Young People’s (YP’s) activities has at times been adjacent to spaces for infants and their mothers, which may not be comfortable for teens.

❖ Friendly spaces for YP can be temporary or permanent structures, or single events or activities that take place in different locations. YP must define what makes a space, service or activity friendly to them. Among the criteria YP cite as important are: safety; a welcoming, inclusive and non-judgmental atmosphere; and opportunities for participation, leadership and action. A key indicator is whether YP are accessing them or not over time.

❖ Adolescent- and youth-friendly spaces created early in emergencies can be starting points for the organization of more formal programs for and with YP, such as education and civic activism.

❖ Adolescent- and youth-friendly spaces must be accessible to marginalized groups, who may include girls, the disabled, out-of-school YP, working YP, teen parents, former soldiers and different ethnic groups.

❖ Youth centers have received significant funding from donors in recent years and are an important form of adolescent- and youth-friendly spaces. Regardless of whether or not youth centers are sustained over time, they serve an important purpose for YP, particularly during post-conflict transitions.

PROMISING PRACTICES

❖ Cultural events, dances, drama, dialogues, community awareness-raising events and non-formal education focused on YP can take place under trees, in parks or other “temporary” safe spaces. This is particularly helpful in emergencies and if populations are still mobile. Tents, municipal buildings and other more permanent structures can also be designated for use, usually at later phases of emergencies.

❖ Working with municipal authorities to identify free or low-cost public spaces often results in the allocation of space for permanent youth centers. Engaging military actors to assist in building structures for free or parents to donate time to lead activities, also produces low-cost support.

❖ Assessing local priorities and resources helps determine appropriate activities and services for youth centers. They should complement, not compete with, formal education systems and GBV, health, psychosocial and protection programs.

❖ In areas where many youth centers or friendly spaces are being developed, creating common standards for them and coordinating requests to government and other supporters helps generate further support and minimize the manipulation of YP by predatory groups in at times chaotic situations.

❖ The existence of youth centers and other friendly spaces increases the profile and status of YP’s concerns throughout the community. YP’s leadership in designing and managing them also affirms them as capable, responsible actors in society.

❖ Building trust between small numbers of YP from divided communities through activities in safe spaces can foster gradual cross-community cooperation and peace building among YP.

❖ Establishing strong ground rules and peer supervision systems with adult support helps centers and other safe spaces avoid becoming harmful environments that privilege particular groups or court violence and drug abuse.

❖ Working with youth groups to define, design and implement adolescent- and youth-friendly spaces and services improves the likelihood of their utility and increases YP’s capacity to organize and manage them in partnership with adults. The benefits of this participation extend to other areas of their lives.

❖ Continually evaluating the focus and impact of friendly spaces for YP keeps them dynamic and responsive to relevant youth issues.

❖ YP engaging in activities in safe spaces can organize and reach out to their peers who may be more marginalized from services and can help them to connect to assistance.
LEARNING FROM EXPERIENCE: DROP-IN CENTER HELPS AFGHAN REFUGEES IN PAKISTAN

Issues: With tight restrictions on job opportunities for parents, many Afghan refugee YP living clandestinely in urban Pakistan are forced to try and earn a living for themselves and their families. They are “garbage pickers,” brick makers or carpet weavers. They are exposed daily to hazards in their work. Some face harassment and detention by police, and parents often punish them if they fail to earn enough money. Few of these YP have opportunities to go to school or engage in recreation.

Responses: The Water Environment and Sanitation Society (WESS) of Pakistan, which traditionally works on water supply and sanitation issues, recognized the important recycling role many of these young refugees play by “garbage picking.” At first, WESS simply wanted to try and help YP by offering them a safe environment away from hazardous work, but they have since expanded their efforts. WESS now operates two drop-in centers where YP can take tea and bread, and attend a variety of classes. Outreach workers are available to counsel YP and at times intercede with Pakistani authorities on behalf of YP when they run into trouble. They also meet with parents and elders about concerns. Outreach began with boys and now includes girls. The drop-in centers provide safe spaces for YP to rest, learn, discuss common concerns and receive advice and help from supportive adults.

TAKE ACTION

- Plan, budget for and establish safe and friendly spaces with and for YP rapidly in emergencies, as well as in long-term conflict and post-conflict environments.
- Work with YP to develop criteria for adolescent- and youth-friendly spaces and services. Assess whether existing programs meet them, and use them for planning. Recognize that friendly spaces for YP can and should be created throughout all sectors of humanitarian response.
- Engage YP creatively through cultural events, dances, drama groups, peace clubs, sports and recreation, knitting groups, forming protection monitoring teams and more. Infuse these activities with opportunities for counseling and other services, life-saving information and life skills learning.
- Develop and implement open systems for listening to and acting on YP’s opinions and concerns voiced in friendly spaces.
- Create opportunities for adults and YP to work constructively together through the development of space centers.
- As activities become more organized, help YP develop more formal programs and youth groups.
- Consider working with YP to establish youth-run youth centers; identify free or low-cost spaces; develop goals and ground rules; and ensure adult support for youth management.
- Develop security and supervision procedures to ensure spaces remain safe but not adult-dominated.
- As appropriate, work with YP and local government to organize youth-focused community events, building bridges between host, refugee and IDP communities.
- Determine which groups of YP are not being served by friendly space activities, and engage YP in developing peer outreach plans.
- Measure the success of friendly spaces for YP not only in terms of sustainability, but in terms of opportunities for participation, protection from harm and the fostering of psychosocial well-being.

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ISSUES AND TRENDS

❖ Adolescents and youth are sources of enormous and invaluable ability, creativity, energy and enthusiasm. They have unique information about, and access to, their communities and should be central participants in shaping and carrying out programs that support them.
❖ In armed conflict, young people (YP) often become responsible for ensuring their own survival and protection. However, their opinions about policies and programs that affect them are still too rarely solicited.
❖ Without support, YP often cope with their circumstances by participating in activities that can ultimately be more harmful to them, such as soldiering or prostitution. Opportunities to participate in “healthier” activities allow YP to redirect the coping and life skills they developed surviving conflict.
❖ YP’s participation may take many forms—from designing and implementing programs as part of youth groups to attending school.
❖ Participatory processes can empower YP, but they can also manipulate them, depending on the degree to which they are able to make informed choices and take autonomous action. YP reveal that full participation must go beyond consultation to opportunities for leadership.
❖ Participation helps YP heal the social dislocation that occurs in armed conflict, allowing them to “reconnect” and feel less marginalized in society. Participation helps YP reestablish a sense of identity and cope with and recover from conflict.
❖ In the absence of adult protection during conflict, YP have a heightened need for peer support and turn to friendships, romantic relationships, youth associations and groups to fill the gap. YP’s support networks and coping mechanisms are important starting points for supporting YP’s participation and capacity.
❖ Humanitarian organizations and donors are increasingly interested in community participation in programming; however, many adult practitioners still view YP’s participation as time consuming instead of as essential and effective good practice.
❖ Adults often fail to commit to helping youth groups build their organizational capacity over time. Youth groups report that donors rarely release full control over project funds for them to manage, hindering their ability to move forward.
❖ Adults dominate refugee and IDP camp committees, and their refugee youth representatives are rarely adolescents. Youth group leaders are also predominantly male, although girls and female youth are often active members and interested in stronger leadership roles.
❖ YP’s participation helps correct community perceptions of YP as “problems,” and raises YP’s status as capable, important members of society. This, in turn, promotes further participation by YP.

PROMISING PRACTICES

❖ If time is short, even engaging a few individual YP, girls and boys, to advise can provide enormously helpful insights into project plans.
❖ Consulting with YP informs programs, but building long-term collaborative relationships with youth groups expands the capacity of both the youth groups and the humanitarian agency to reach YP with appropriate, effective programs.
❖ Bringing heterogeneous (age, ethnicity, sex, etc.) groups of YP together to participate in projects helps them learn more about the different situations YP face and find new cooperative ways to address them.
❖ Schools are ideal places to engage school-going YP in participatory programs; however, youth centers and other youth-friendly spaces and events also provide excellent opportunities to reach out to and work with more marginalized YP.
❖ Identifying caring adults to facilitate YP’s participation helps rebuild trust between YP and adults and creates new, mutually supportive social relationships out of social upheaval in conflict.
❖ Supporting the registration of YP’s organizations as NGOs can minimize their competition over scarce resources and increase their access to policy discussions and donor funds.
❖ Involving YP in research and assessment work about their lives places them in a strong position to advocate on their own behalf. When YP can speak articulately for themselves, they are heard and taken seriously more often.
❖ Youth congresses and international youth forums that involve YP in a country or region in developing topics for national and international discussion can be strong mechanisms for advancing YP’s issues, collaboration and political and social voices.
❖ Allowing YP to fully manage project funds affords them the opportunity to experience full professional and organizational responsibilities, which they will need as the future leaders and administrators of their communities.
❖ Older adolescents, youth and adults, can play strong support roles assisting younger adolescents to participate in program and other activities, as younger adolescents often need additional guidance.
❖ Asking women’s groups and other local NGOs to collaborate with youth groups on projects helps increase interaction between adults and YP in local communities and develop constructive relationships between them.
LEARNING FROM EXPERIENCE: KITGUM, NORTHERN UGANDA — YOUTH GROUP EMPOWERS YOUTH

Issues: The ongoing 18-year war in northern Uganda continues to wreak havoc on the lives of adolescents and youth. YP are the principal targets of violence, and the overwhelming conditions that surround YP drain them of any sense of hope for the future.

Responses: Following an adolescent-led field study with the Women’s Commission that sought to identify adolescents’ concerns, interests and ideas for improving their lives, groups of YP involved in the research went on to form three youth NGOs in separate districts. The Watwero Rights Focus Initiative in Kitgum was started in 1998 by educated, unemployed youth, whose first several dozen members attempted to generate some income for themselves. Watwero has since received funding or other support from a variety of organizations, has many branches, and its mission is to empower young people economically and socially. Watwero has undertaken income-generation projects, and offers workshops to enhance the skills of many members, most of whom range in age from 15 to 30. Members have been trained in HIV/AIDS sensitization and have conducted awareness-raising activities in schools. They have been engaged in peace education and peace club activities. Often, these YP take risks that international NGOs will not as they venture into physically insecure areas. In their work, they also risk failure, stigma, violent backlash, rejection, disappointment, disillusionment and further manipulation by adults and local leaders. Watwero is increasing its capacity as an organization that advocates for YP’s participation in decision-making and has recently secured a standing invitation to attend regular UNOCHA-led security coordination meetings and a commitment by UNOCHA to establish a protection working group that will address child and adolescent protection issues. This type of recognition adds to YP’s confidence, status and capacity at local, national and international levels. Although Watwero has done much to advance the protection and participation of YP, it continues to need strong support and encouragement to further build its organizational capacity to positively influence each of the sectors it is engaged in.

TAKE ACTION

- Identify YP’s coping strategies and existing peer support and action networks, including youth groups and associations. Work with YP to find creative ways to build on the strengths they have developed coping with conflict together.
- To find out about the problems YP are facing and the best ways to address them, ask them and involve them, individually and in groups, placing them at the center of the work you are doing.
- In general it is a good idea to speak to parents and other adults in the community before or soon after inviting YP to participate in activities.
- Undertake situational analysis or other assessment work with YP, and ensure they have opportunities to influence the questions and process.
- Before implementing any project, ask YP their opinion of the project, and what roles they would like to play. If you are a YP, ask to what extent capacity-building will be a goal of your partnership and the extent of your leadership role.
- Involve out-of-school and other more marginalized YP as well as school-going YP or those who are already activists; through activities in youth centers or other spaces where YP gather.
- If implementing a project for a particular group of YP, such as teen mothers, engage them in planning and implementation. As appropriate, attempt to engage other YP from outside their group to decrease the particular group’s isolation and increase cooperation among YP.
- Where culturally possible, ensure girls and boys have opportunities to participate cooperatively together, in equal numbers. Where girls and boys must act separately, ensure they have opportunities to exchange information about their work, to learn from and about each other.
- Identify caring adults who can mentor and assist YP in their activities without manipulating or controlling them. Younger adolescents especially need the support of adults and youth in ensuring their involvement in decision-making and other activities.
- When possible, develop baseline information and evaluate the impact that YP’s participation has had on program work, on you, the YP and their communities over time.
- Engage in advocacy activities with YP. Bring them to meetings with donors, UN, government and other officials. Offer them opportunities to have direct access to systems and decision-makers that affect their lives.
- Train YP to undertake the activities they are interested in, drawing from community resources and traditions, and assist YP in training one another in the skills they learn.
- Use music, storytelling, dance and other activities to communicate with one another and achieve your goals. Remember that YP are often used to formal interaction, even with one another, so you might be the one introducing new, informal approaches.