

Rolling out the *Advocating for Change for Adolescents* toolkit in five countries:

highlights, challenges
and lessons learned

Youth Advocacy Brief





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Background

With support from the Partnership for Maternal, Newborn & Child Health (PMNCH) and Women Deliver, the *Advocating for Change for Adolescents* toolkit was created by young people for young people, to lead and influence change in their communities as well as to hold governments accountable for delivering on their commitments to prioritize adolescents' health and well-being. The toolkit provides youth-led and youth-serving organizations with the resources and strategies they need to become effective champions and advocates.

Following its launch at the Global Adolescent Health conference in Ottawa in May 2017, five youth organizations (in Cameroon, India, Kenya, Malawi and Nigeria) received grants and technical support to pilot the toolkit over a 12-month period. In December 2018, an updated toolkit was launched at the Partners' Forum in New Delhi, India. The new edition is more youth-friendly and comprehensive, and includes the five youth-led organization as illustrative case studies. It also highlights young people's involvement in shaping national policies through processes such as the Global Financing Facility (GFF) and includes facts and information on how to engage in the GFF at country level. In 2019, PMNCH working with Girls' Globe issued five second-year grants and provided technical support to youth organizations in the five countries that participated in Phase 1. Phase 2 runs from January to December 2019.

Grantees have adapted the toolkit to their country's context and developed country-specific advocacy roadmaps, which are being implemented throughout 2019 with activities at national and subnational levels. Many of the grantees have incorporated the country toolkit into their broader advocacy efforts. As part of their advocacy activities, adolescents and youth organizations have represented and contributed meaningfully to national programmes and processes. They have also raised the visibility of their efforts through social media, as well as on regional and global platforms.

Thus far the project has exceeded the expected outcomes. Young people and youth-led organizations are being equipped with the advocacy skills, knowledge and resources they need to lead and organize action. They are forging stronger relationships with their governments and developing tight-knit networks of change-makers who are influencing policies, programmes, processes and decisions affecting adolescents' health and well-being.

This advocacy brief shares the highlights of, challenges to and lessons learned in the five countries for the period from the project's inception until June 2019. It focuses on best practices in capacity building, coalition strengthening, advocacy and accountability, as well as engagement in decision-making bodies, including national multistakeholder GFF platforms. It is intended to assist youth-led organizations and national youth coalitions interested in using the advocacy toolkit, including the additional five organizations who will receive grants from PMNCH to roll out the toolkit in 2020-2021 in their respective countries. It will also be relevant to youth-serving organizations and other stakeholders and champions promoting youth-led advocacy.



CAMEROON: Cameroon Youth Network

The Advocating for Change for Adolescents Project in Cameroon is being run by the Cameroon Youth Network (CYN), a network of over 50 youth-serving organizations and clubs across Cameroon. CYN's goal is to facilitate the exchange of experiences and information between member organizations by supporting and strengthening their visibility. Two of its objectives are:

- to promote young people's participation in decision-making and promote their exchange of experience and information in the context of HIV/AIDS programmes and all development initiatives that are relevant to the country's young people;
- to strengthen members' abilities to communicate, plan, realize, manage, monitor and evaluate projects for young people, and to produce and disseminate educational materials.

Website:
<https://orgs.tigweb.org/cameroon-youth-network-or-reseau-des-jeunes-du-cameroon>

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Project highlights (as of June 2019)

Adapting the Advocating for Change for Adolescents toolkit to the Cameroon context was a lengthy process, involving four advocacy meetings and 15 workshops. Once the content was finalized, it was translated and printed in both English and French. Young people were meaningfully engaged throughout the process, together with government stakeholders and partner organizations.

Participants in the workshops also helped to produce a monitoring and evaluation toolkit to collect and analyse disaggregated data on adolescent health and well-being in secondary schools. These two new toolkits were combined with the Comprehensive Sexuality Education Manual (developed by DESERVE Cameroon) to form the Adolescent Health and Well-being Package (AHWP).

The AHWP was launched on 12 August 2018 at the National Museum in Yaoundé to coincide with the 19th International Youth Day. The launch event was achieved through collaboration with the Ministry of Youth



Affairs and Civic Education (MINJEC), which has played an active and influential role throughout the project. Government and United Nations representatives and the media attended, as well as 300 young people affiliated to the CYN.

Phase 2 is focused on strengthening accountability for adolescent health and well-being through disseminating about and advocating for piloting and institutionalizing all three components of the AHWP in secondary schools and youth groups. CYN has developed media messages and a strategy to communicate the AHWP and is holding meetings with MINJEC officials to secure the Minister's endorsement. CYN's proposed strategy to pilot the AHWP in select secondary schools in the North West Regions has the support of the Ministry of Secondary Education and is due to start in September 2019.

Challenges

With the exception of MINJEC and the Ministry of Secondary Education (MINESEC), engagement with other key government officials in the first phase of the project was difficult; for instance, in getting an active representative from the Ministry of Public Health (MINSANTE) in the initial work or the launch of the project.

In order to harness inputs from CYN's many members from different member organizations, a taskforce was set up to implement project activities. A reference committee for technical referrals and a broader stakeholder committee comprising government and NGO stakeholders were also established.

The sociopolitical crisis in Cameroon's two English-speaking regions resulted in reduced internet availability and lockdown, which hampered the project. To maintain strong virtual links between partners, CYN divided the operationalization of the project between the city of Bamenda and the nation's capital, Yaoundé.

Next steps

CYN will continue working with officials in the MINJEC, the Ministry of Secondary Education and the Ministry of Public Health to garner interministerial support for the AHWP.

By involving GFF organizations in its work, CYN hopes that adolescent health and well-being will be given the priority it deserves, especially across government circles.

CYN plans to make a strong case for a third phase of the project, which will evaluate the pilot roll-out of the AHWP in select secondary schools and scale it up more widely across Cameroon.

Lessons learned

Supportive and passionate government stakeholders are needed to partner with young people in order for youth-led innovations to be accelerated within government.

Young leaders must be aware of the complexities of dealing with government and other organizations. They need skills in networking as well as enthusiasm to pursue development. They must find officials who not only support their innovation, but actively boost their work. They must be mindful of opportunists and "hand clappers". If possible, they should connect directly with top officials in the target government departments: bottlenecks often occur at the base of a hierarchy.

Support from international organizations for connecting young people with government officials at events such as the United Nations General Assembly is important for promoting meaningful youth engagement at country level. The most influential government stakeholders should be engaged in order to accelerate action.



For more information see:

https://www.who.int/pmnch/media/blogs/blog_bolstering_accountability_cameroon/en/



INDIA: The YP Foundation

The YP Foundation (TYPF), founded as a youth collective in 2002 and registered in 2007, is a youth-led and youth-run organization in India working towards building youth leadership, particularly in the areas of health and gender equality.

TYPF is using its Advocating for Change Project grant to advocate for meaningful participation by young people in the design and delivery of India's adolescent health programme – Rashtriya Kishor Swasthya Karyakram (RKSK) – in order to ensure that it is grounded in young people's lived realities. In collaboration with Ministry of Health & Family Welfare (MoHFW), TYPF is creating an advocacy manual in the form of a toolkit suitable for use by peer educators under the RKSK programme. It is also developing a cadre of young advocates with the knowledge, skills and vocabulary to effectively advocate on adolescent health, and increasing their engagement with decision-makers.

Website:
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Highlights (as of June 2019)

As a first step, TYPF worked with the Adolescent Health Division of the MoHFW to adapt the toolkit to the Indian context. The new toolkit was launched by high-level health officials during the International Association of Adolescent Health's 2017 World Congress. Since then, TYPF has strategically engaged with the health ministry, in multiple efforts and through various platforms, to advance meaningful youth engagement in adolescent health issues.

Following the launch, a web-based interactive version of the toolkit was created.

The toolkit serves as a valuable resource for designing workshops to show young people how to advocate effectively, especially on adolescent health issues.



In partnership with the MoHFW's Adolescent Health Division, TYPF hosted many subnational youth consultations on adolescent health across the country in order to formulate clear and actionable recommendations to the health ministry for improving adolescent health programmes. A multistakeholder platform enabled participation by national- and state-level health officials, civil society organizations, United Nations agencies and donors. Youth-led advocacy with health officials is ongoing at all levels to implement these recommendations, and more youth consultations are being organized to incorporate more diverse voices.

Advocacy workshops based on the toolkit have helped young people to plan and undertake advocacy initiatives.

A constant focus has been to create and sustain diverse, inclusive and widespread networks of youth advocates who engage with different stakeholders in order to cross-learn, cross-share and work together. The objective is to create autonomous networks of young people across India who are able to advocate for adolescent health and engage with adolescent health programming at local, district, state and national levels. TYPF plays a convening role, and offers technical and financial support. Recently, the Adolescent Health Division of MoHFW has expressed interest in creating a National Youth Council on Health: these networks have the potential to transform into such a body.

All these efforts are intended to institutionalize meaningful youth engagement in adolescent health programming in India. The toolkit has played a vital role in catalysing youth engagement and providing a framework for that work.

Challenges

General challenges include: lack of political will at national and state levels to prioritize and invest in adolescent health; lack of recognition of the diversity of young people and their realities; under-appreciation of young people's potential as advocates; and limited avenues for meaningful youth engagement in adolescent health programming.

India's general election during April and May 2019 slowed the project's implementation.

TYPF's presence is limited to the national capital and (through implementation partners) three other states. This challenge is being addressed by initiating dialogues with state- and district-level health officials across the country through this grant, and through other advocacy initiatives and avenues.

Lesson learned

Through this project, TYPF has forged strong connections with the MoHFW and relevant stakeholders at different levels, and learned to work effectively with government and other partners.

Advocacy workshops based on the toolkit have inspired many young people to take up small social action projects to address various adolescent health-related issues in their own communities.



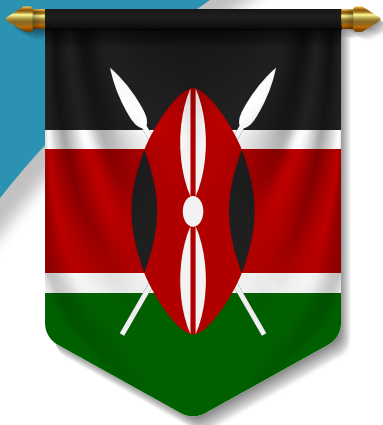
Next steps

Key priorities include finalizing the advocacy manual and facilitator notes and the monitoring and evaluation tools for implementation in collaboration with the MoHFW's Adolescent Health Division. The advocacy manual will be a simpler workbook suitable for use by all adolescents (including RKS's peer educators). It will be implemented in various districts in the country and may subsequently be integrated into the national programme on adolescent health.

In addition, TYPF will continue reaching out to district health administrators and their state counterparts.

For more information see:

https://www.who.int/pmnch/media/blogs/india_meaningful_youth_engagement/en/



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KENYA: Organization of African Youth

The Organization of African Youth – Kenya Chapter (OAY) is composed of youth-led organizations and networks working for sexual, reproductive, maternal, newborn, child and adolescent health and the Sustainable Development Goals.

It is using its Advocating for Change Project grant in three ways: building the capacity of adolescents and young people to meaningfully engage and participate in relevant government and stakeholders' processes, including the GFF and UHC, to increase access to health information and services, especially sexual and reproductive health and rights (SRHR); working collaboratively with the government to promote young people's meaningful participation in these processes; and collecting and amplifying young people's voices and increasing dialogue between adolescents and government teams.

Project highlights (as of June 2019)

OAY began work on this project in September 2017 by establishing a working group of 15 organizations to adapt the global Advocating for Change for Adolescents Toolkit to the Kenyan context. This was supported by the Ministry of Health (MoH), the National Youth Council and 23 other partners. The MoH reviewed the toolkit, wrote the foreword and took part in its national launch in March 2018, attended by over 600 people from around the country. The toolkit is available at <https://oayouthkenya.org/documents/>.

OAY has trained over 40 youth-serving organizations and 200 youth advocates across 10 counties in Kenya to use the toolkit. OAY has also used the toolkit to design advocacy strategies, such as engagement in the 6th Devolution Conference in 2019, which resulted in a commitment to prioritize investment in adolescents' health and well-being.



OAY is disseminating the adapted toolkit to relevant stakeholders in four counties so that they can advocate for increased investment in adolescent health, including SRHR, within the GFF, UHC and other programmes. As a result of the successful dissemination of the toolkit in Kajiado County, OAY was requested by the Maasai Technical College's Deputy Principal to help set up a Youth Health Advocates Student's Club. In partnership with other youth networks, OAY is using the toolkit as an advocacy training manual for youth advocates in Kilifi, Narok and Homa Bay counties.

Data collected by OAY from 200 young people will be used to inform the "Meaningful Youth Participation and Engagement Framework", to be developed by the MoH with partners including OAY. The MoH has also invited OAY to join the Adolescent Technical Working Group.

Challenges

One of the main challenges at the beginning of the project was the prolonged electoral campaign, which culminated in a run-off and violence, making it nearly impossible from August to November 2017 to mobilize anyone for advocacy work. Other challenges included government bureaucracy, youth mobility that hampers consistent engagement, tokenistic youth engagement, and inadequate capacity within youth-led organizations in terms of skills, human and financial resources and experience in youth work.

The toolkit can only be used by those who can read English and have access to a computer and the internet. A Swahili version and more printed copies would be beneficial. Moreover, the toolkit may need to be revised regularly in line with emerging issues (e.g. increasing calls for the integration of advocacy on HIV and SRHR).



Lessons learned

The roots of many adolescent health issues are outside the health sector. Young people's health-seeking behaviours need to be understood and reflected in policies and programmes, and privacy and confidentiality assured.

Use of technology, especially social media, enhances dissemination of the toolkit and its use by youth advocates.

School health programmes are effective for reaching and engaging adolescents through diverse, creative and youth-friendly strategies.

Working together is key to putting into practice the spirit of the youth movement and achieving results.

Informing and equipping young people with advocacy and leadership skills strengthens accountability and increases demand for youth-friendly services.

Next steps

Future priorities include increasing awareness of the GFF among youth groups and networks and working with the Kenya GFF Civil Society Coordinating Group under Health NGOs Network (HENNET) to foster mutual accountability and establish a Kenya Multistakeholder Coordinating Platform.

OAY will continue to build the capacity of youth organizations and develop the toolkit's Training of Trainers manual to instruct a pool of youth advocate facilitators who understand and can use the toolkit both for their advocacy and accountability work and to build strong youth-led coalitions. This will be done in cohorts in partnership with the Ministry of Health with a pilot class being trained in 2019.

Suggestions for improving the toolkit and emerging issues will be documented for inclusion in a new version, and online modules will be developed.

OAY will continue working with the MoH, county health departments and youth-led organizations to disseminate the toolkit and promote its adoption as a key referencing document in their programming, training and health promotion activities.

For more information see:

https://www.who.int/pmnch/media/blogs/blog_organisation_for_african_youth_kenya/en/



MALAWI:

HeR Liberty Malawi

HeR Liberty, a youth-led organization, is equipping and empowering young people in Malawi to be agents of change in their own communities. HeR Liberty is using its Advocating for Change Project grant to give young people the tools and information necessary to make informed choices about their well-being and health. HeR Liberty is also building young people's capacity to advocate for better access to SRHR information and services and to engage meaningfully in the National Youth Friendly Health Services Strategy and with decision-making bodies such as the GFF.

Website:
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YouTube:
www.youtube.com/watch?time_continue=53&v=6CjLjYImvmw

Highlights (as of June 2019)

In the first phase of the project (September 2017-October 2018), HeR Liberty produced a short film and music video advocacy toolkits to raise awareness of key policies targeting young people and their SRHR and how to engage key decision-makers.

In Phase 2 the global advocacy toolkit was rebranded as *YEAH!* (Youth Engage on Adolescent Health) and an advocacy roadmap was developed in collaboration with 15 youth networks, UNAIDS, UNESCO, the White Ribbon Alliance and other youth-serving partners.

A communication strategy and media campaign were implemented for the short film and music toolkit using social media, online media and traditional media. The song "inu ndi ife" was shared with eight radio stations, and downloaded from www.malawi-music.com over 7,500 times; the short film was broadcast on six television channels.

HeR Liberty has convened intergenerational dialogues with over 20 traditional and community leaders from four local districts, focusing on the National Youth Friendly Health Strategy. At the same time, youth leaders in those four districts have been trained and meaningfully engaged in developing approaches to engage adolescents in a manner suited to their respective communities.



Youth leaders worked with 80 youth clubs who conducted over 700 YEAH! “Power Talk” sessions with adolescents and young people.

Realizing that youth leaders in the district lack guidance materials on advocacy, HeR Liberty developed an advocacy flashcard roadmap, showing key stakeholders, key policies and avenues for communication in the Malawian context, in both English and Chichewa.

HeR Liberty conducted sessions to build capacity in policy knowledge, policy engagement (including GFF processes) and coordination for over 100 youth leaders. In addition, one-day training sessions were carried out in eight districts with District Youth Network Committee members and other stakeholders.

Challenges

- Many adolescents in hard-to-reach rural areas have little knowledge of SRHR and find some of the concepts difficult to understand. Age-appropriate materials on adolescent SRHR are lacking in Malawi and literacy rates are low.
- Some parents find it morally unacceptable for adolescents to discuss SRHR and will not allow their children to participate in SRHR-related consultations or activities.
- Due to the gap in the disbursement of funds, HeR Liberty had to defer some planned activities. There were also challenges in obtaining support from the Civil Society GFF Resource and Engagement hub for strengthening coordination between youth-led organizations and advocacy strategies.
- The allowance dependency syndrome affects project implementation because some participants are financially unstable.

Lessons learned

HeR Liberty worked with youth leaders to co-develop approaches, and then let them develop their own work plans. In 30 days they reached approximately 4,000 adolescents, engaging them in advocacy dialogue sessions and strengthening comprehensive sexuality education and SRHR messaging. HeR Liberty believes this success was due to young people being given full autonomy to decide what works for them and their communities.

Involving key district stakeholders and community gatekeepers has helped to establish YEAH! in the districts; key district partners continue to support youth leaders’ activities.

Training young people to write narrative and financial reports of their activities helps empower them as youth leaders. Given Malawi’s low literacy rate, HeR Liberty drafted simple narrative and financial templates.

HeR Liberty taught youth leaders about decision-making in local government bodies and developed advocacy flashcards adapted for the Malawian context, showing how to use advocacy and channels of communication to maximum effect.

To strengthen accountability, HeR Liberty learned to disburse funds through youth-led organizations, rather than individuals. Organizations provide better accountability, coordination and disbursement of funds, while still involving youth leaders.



Next steps

The impact of the music video and short film will be evaluated to assess their effectiveness in supporting advocacy work by youth networks and youth-led organizations. The survey findings will be used to further promote the music video and short film, to facilitate engagements with key district officers, to lobby for interventions to address adolescent SRHR challenges and to influence GFF processes.

UNAIDS and UNESCO have expressed interest in providing HeR Liberty with support to scale up YEAH! across Malawi.

HeR Liberty will continue to share vlogs and articles on best practices for engaging stakeholders and advocating for adolescent well-being and health.



NIGERIA: Education as a Vaccine

Education as a Vaccine (EVA) is a non-profit organization founded in 2000 to improve the health and development of Nigeria's children, adolescents and young people, focusing on SRHR. EVA is using its Advocating for Change for Adolescents Project grant to improve the policy environment that upholds the rights of adolescent and young people to SRHR information and services in Nigeria.

Project highlights (as of June 2019)

In collaboration with partners and with inputs from young people across seven states, EVA adapted the global toolkit into a national advocacy factsheet and developed an instructional guide to help young people advocate on their own. Key ministries were consulted in order to review the adapted toolkit; with their endorsement this was launched on World Population Day, 11 July 2018, by the Chairman of the National Population Commission.

To guide the way forward, EVA worked with other partners and youth networks to develop an advocacy roadmap. The same collaborative process was used to review and update both the factsheet and the roadmap in early 2019.

Through webinar series, online trainings and workshops in several states, EVA is building a movement of young people with the skills to influence change in their communities and to advocate for the implementation of laws and policies that will result in the government upholding the health rights of all adolescents and young people in the country, including their SRHR.

To influence policies, EVA identifies relevant stakeholders and engages them in face-to-face discussions and online campaigns about the need to support policy change at state and national levels that promote adolescents' health and well-being, sharing evidence and young people's

Website:
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www.instagram.com/eva_nigeria/

YouTube:
www.youtube.com/channel/UCJi5-L-klmJbiMnIYeGpQMg



experiences at community level. EVA has also forged new partnerships with allies to amplify young people's voices within both government and civil society.

EVA analysed the Basic Health Care Provision Fund (BHCPF) and identified a lack of prioritization of adolescents' and young people's health, which does not reflect what is in the GFF Investment Case. This information is being used to develop policy briefs to support advocacy to relevant decision-makers for the specific inclusion of adolescents and young people as beneficiaries of the BHCPF.

Challenges

A major challenge at the beginning of the project was to get other youth-led organizations to commit to the process of adapting the global toolkit and building a strong, youth-led health advocacy network.

Gaining support for the toolkit from high-level decision-makers and government officials was also difficult because they saw the toolkit's "asks" as an attack on their policies and programmes, putting them on the defensive from the outset. Also, Nigeria's general election on 23 February 2019 prevented EVA from carrying out advocacy visits to policy-makers for several weeks before and after.

An ongoing challenge is that very few young people in Nigeria are aware of their health rights, or of how they can use advocacy to influence the government bodies accountable for their health and well-being.

Lessons learned

- Forging strategic partnerships with key government stakeholders and CSOs is essential for advancing advocacy asks.
- Bringing together various groups of stakeholders helps to ensure that everyone understands their role in advancing adolescents' and young people's health and well-being.
- Advocacy by young people for their own rights is more directly appealing to stakeholders and decision-makers.
- Expanding the project to cover multiple states enables the toolkit to be widely shared across the country, not just in the capital city.
- Using online communication platforms such as Zoom (which allows for screen-sharing and PowerPoint presentations) to conduct training sessions greatly minimizes costs, especially the costs of travelling.
- Training sessions have a multiplier effect: participants who acquire knowledge are enabled to show other young people, in their own dialect or language, how to use the advocacy toolkit. In this way, even more young people learn how to reach policy-makers at local, state and national levels and to hold them accountable.



Next steps

Through its implementation of this project, EVA has earned recognition from the government and CSOs, and has become involved in other youth networks. Using the experience and contacts it has gained, EVA will train even more young people to become committed advocates. It will continue to work closely with young people from different organizations and groups, inviting them to participate in advocacy visits and other engagements.

EVA will dedicate more time and resources over the course of this project to youth-led advocacy and accountability around the GFF, mobilizing and building the capacity of youth groups to engage with CSOs in the GFF process.

For more information see:

https://www.who.int/pmnch/media/blogs/blog_advocating_for_change_Nigeria/en/

Fostering young people's engagement in the Global Financing Facility

Analysing youth engagement in the GFF process in four countries

Under the guidance of the GFF Civil Society Coordinating Group, PMNCH funded Global Health Visions to analyse youth engagement in the GFF process in four countries (Kenya, Senegal, Sierra Leone and Uganda) and to recommend ways in which the GFF can strengthen meaningful youth engagement at all levels. The recommendations emphasize the importance of building on what is already known and documented about meaningful adolescent and youth engagement, including:

- setting up rights-based, safe and transparent processes;
- developing a clear framework for engagement;
- using appropriate terminology and inclusive language rooted in equality and diversity; and
- focusing on building skills and opportunities for growth.

By participating in planning, implementation and monitoring, young people make positive contributions: providing their own perspectives on the issues they face, and making grassroots connections with their communities, both of which are essential to the accountability and sustainability of the GFF. The challenges and bottlenecks identified in the analysis present important learning opportunities. Global Health Visions made four recommendations:

- increase youth representation on national and global platforms;
- increase resources to support effective youth engagement and coordination, and feedback loops;
- provide CSO support for youth engagement; and
- counter cultural norms that, by equating age with expertise, underestimate the abilities of young people.

Global efforts to strengthen youth engagement in the GFF

These findings and recommendations provided the evidence base for the Adolescent and Youth Addendum to the GFF Civil Society Engagement Strategy (www.globalfinancingfacility.org/sites/gff_new/files/images/Youth-Addendum-CS-Engagement-Strategy.pdf) and for the related adolescent and youth action plan which currently guide youth efforts related to the GFF. See <https://www.csogffhub.org/wp-content/uploads/2019/05/GFF-Adolescent-and-Youth-Engagement-Action-Plan-.docx>

Building on the Addendum, PMNCH hosted four capacity-building webinars for civil society organizations, including, for youth organizations “How to engage in the GFF: a dialogue with young people”, in English at www.youtube.com/watch?v=MkVZ_sGwIDE, and in French at www.youtube.com/watch?v=MkVZ_sGwIDE

“In Africa, we still believe that elders must be the only leaders. We are not seen as being intelligent and resourceful in decision-making.”
— Youth Representative, Nigeria

Supporting national youth coalitions to engage in the GFF process

PMNCH also supported national youth coalitions to engage in the GFF process in their countries. For instance, in Malawi, the Malawi Youth Global Fund Country Coordinating Mechanism Representative and the GFF Youth Representative together with HeR Liberty facilitated a meeting in October 2018 aimed at centralizing young people especially girls and young women in policy design and implementation. Several recommendations came out of the meeting, including the setup of a GFF youth platform to engage youth at national and subnational levels.

In Kenya, adolescents and young people have been engaged in the GFF process since 2016 through their engagement in annual GFF civil society workshops. In 2018, OAY organized GFF training for 15 youth-led organizations in partnership with HENNET, Nairobi City County Government and the Kenyan Council of Governors' GFF office.

The two main challenges to youth engagement in the GFF in Kenya are lack of awareness about the GFF, the projects it funds (information and transparency) and how it differs from other health budgets, and the lack of focus on adolescent health-related budget lines in Kenya's RMNCAH Investment Framework. OAY is an active member of the GFF CSO Coordination Group, which aims to ensure that CSOs strengthen GFF accountability, that health systems are strengthened, and that a national coordination framework is established. Through this platform, young people are encouraged to make their voices heard in alignment with the CSOs. Young people in Kenya have developed a GFF working group and workplan. The workplan's priorities are drawn from Kenya's RMNCAH Investment Framework, with a focus on accountability for its implementation, and include: (1) capacity building, GFF awareness and accountability; (2) GFF advocacy for improved functionality of health facilities to deliver essential PHC services; and (3) demand creation through creative, smart and sustainable mobilization.



Summary of challenges and lessons

Capacity building

The revised global toolkit has facilitated new collaborations with ministries and is more useful and attractive to youth networks at the country level. Examples of its use include the production of a short film and music video to reach illiterate young people.

Webinars and other opportunities to share experiences between countries and with a wider set of partners help to identify common challenges and promote interactive solutions.

Coalition strengthening

Large youth networks need to be coordinated in order to collaborate effectively, undertake unified advocacy and motivate partners to pursue collective “wins” together.

Beyond government officials and youth groups, limited resources can make it difficult to work with a broader range of stakeholders.

Age-related transitions (e.g. aging out, moving from school to employment, changing jobs for new experiences) can sometimes disrupt youth-led coordination, learning and knowledge management.

Speaking to government officials and other stakeholders both informally and formally can help to secure their buy-in and support.

Advocacy and accountability

Political changes in government, including turnover of key decision-makers, can hamper plans for adapting and rolling out the toolkit.

Advocating for politically sensitive issues, such as comprehensive sexuality education, can be difficult.

PMNCH’s support for this project adds credibility to young people’s engagement, and facilitates introductions to key decision-makers.

Elevating youth advocates’ voices at regional and global fora (e.g. United Nations General Assembly, Commission on the Status of Women, Africa Conference on Sexual Health and Rights, Partners’ Forum) helps young people to engage with decision-makers in a meaningful way.

Engagement in decision-making

Building long-term relationships with decision-makers across ministries, particularly working with senior and technical officials, is key to achieving results.

Tokenistic, sporadic or ad-hoc engagement of youth organizations and networks undermines the contributions made by young people generally to the development and implementation of policies and programmes.

Youth networks should advocate for a governmental structure that unifies key ministries’ approaches to youth issues in order to enable the coordination of partnerships.

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The Partnership
for Maternal, Newborn
& Child Health