

Panel Discussion I: Collection of an Evidence-Base for Programming

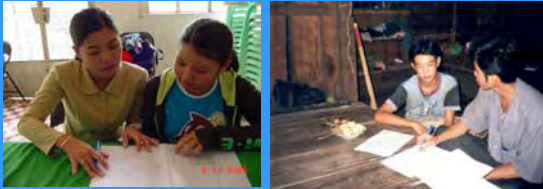
5. Survey and Assessment of Vietnamese Youth: A Partnership between the Ministry of Health, General Statistics Office, WHO and UNICEF Vietnam

- Le Thi Minh Chau, Project Officer, Healthy Living and Lifeskills, UNICEF, Vietnam

BREAKING NEW GROUND WITH YOUTH IN VIETNAM

SURVEY AND ASSESSMENT OF VIETNAMESE YOUTH

A partnership between the Ministry of Health, General Statistics Office, WHO and UNICEF Vietnam (2003-2004)



DEMOGRAPHICS

- Population: 80 million
- 25% urban - 75% rural
- Young people (14-25 years): 25%
- 64 provinces and cities
- Birth rate: 1.9 (Decreased over last 10 years)
- Income: 430USD
- Introduction of Doi Moi 1986 has seen huge economic growth with average growth 7% per year

RATIONALE

SURVEY AND ASSESSMENT OF VIETNAMESE YOUTH (SAVY)

- Young people a big cohort
- Emerging development issues affecting young people: HIV/AIDS, injuries, substance use, abortions, etc
- No nation-wide baseline data on youth
- Increasing commitment by government to adolescents health and development
- Increasing international collaboration

BACKGROUND INFORMATION

- First and largest ever National Adolescent and Youth Survey in Viet Nam
- Representative sample of 8,000 young people aged 14-25 years distributed across 446 communes of 42 provinces
- Sample of youth drawn from VHLSS 2002
- SAVY Partners work closely Youth Union, Women's Union, Ministry of Education, and Research institutes. Technical assistance by the East West Center

WHAT IS SAVY ABOUT?

- SAVY provides information related to a number of indicators to construct a profile of Vietnamese adolescents and youth
- Extensive topics: education, reproductive health, mental health and stress, employment, risk and protective factors, drug use, violence, access to services, media and future outlook
- Perceptions and attitudes of young people on the above issues
- Expectations and needs

SAVY METHODOLOGY

- Questionnaire survey
- Methodology involved interview and self completed section
- Intensive consultation process with young people: 500 young men and women, in and out of school, ethnic and Kinh, urban and rural contributed to shaping the questionnaire and the field work process

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SAVY RESULTS

- Age, gender and ethnic, rural and urban disaggregation
 - 14-17 years: 3,228
 - 18-21 years: 2,544
 - 22-25 years: 1,812
- Risk and Protective framework of analysis
- Cross tabulations to examine linkages between issues
- Preliminary and selected results presented, report being finalised

SAVY RESULTS

- Education
 - 69% receiving private tutoring (78% urban, 66% rural, Kinh 74.3%, EM 31.7%). More a recent phenomenon
 - General positive attitudes, agreeing that schools treat students equally boys at 90% and girls at 87% (25% of young women 22-25 disagreed)
 - 90% really want to go to university

SAVY RESULTS

- Work
 - 55% ever worked in a paid capacity. More than 50% non-skilled work in agricultural or non agricultural area. Self employment, family enterprises, private
 - Vocational Training: 19% (ethnic minority area 5%, Kinh 21.2%)
 - 33% could not find the job they were trained for

SAVY RESULTS

- Puberty:
 - At puberty talked with no-one: 85% boys, 15% girls
 - 75% without correct knowledge of fertile time in menstrual cycle

SAVY RESULTS

- Alcohol use:
 - 69% young men and 28% young women ever drunk beer or liquor
 - More common among urban than rural (56.9 and 46%)
 - 16% young people have alcoholic father
 - Frequent heavy drinking 8%. Associated problems: violence at home, having sex, motobike racing, group riot...

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SAVY RESULTS

- Pre marital sex:
 - Overall: 4.8%. Important to note that sample has a large group of 14-17yrs
 - Low in younger group but much higher in 22-25 cohort, with 33% urban young men
 - Under reporting among women
 - Reported after marriage 28% men, 14% women

SAVY RESULTS

- Homosexual: 60% know what a homosexual is and of those, 80% said would not be friend with them
- Social relationships: 12% young people reported no group of friends (8% boys and 16% girls; ethnic girls at 24% compared to 13% Kinh girls...)

SAVY RESULTS

- Self assessment:
 - Over 90% (fully or partly) feel valuable to family, having some good qualities, can do what others can
 - I am not proud of myself: (24% agreeing)
 - Sometimes I am no good at all: (31% agreed)

SAVY RESULTS

- Personal Outlook:
 - In general showing a face of young Vietnamese people as resilient, hard working, positive and ambitious
 - 20% at some stage felt really helpless and hopeless about the future

CROSS TABULATIONS WITH PROBLEM BEHAVIOURS

- Lowest scored for:
 - Personal self assessment
 - Future outlook
- Lowest and highest scored for
 - School connection
 - Family situation
- Highest scored on violence indicators
- School drop-out
- Having alcoholic father

USE OF SAVY DATA

- Raise public awareness of youth profile
- Promote discussions among various groups of young people, parents, practitioners and authorities about young people's issues, concerns and perspectives
- Programme interventions/services with adolescents and youth from an evidence base.
- Advocate for national policies, strategies and programmes which are youth friendly, e.g. adolescents health policy
- ?

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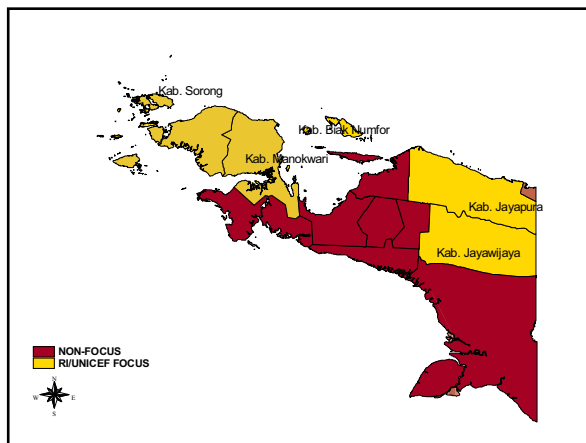


THANK YOU

6. Key findings: Baseline Data Collection for UNICEF Intervention Aimed at Reduction HIV Vulnerability of Youth People in Papua, 2003

- Rachel Odede, HIV/AIDS Project Officer, UNICEF Indonesia

**Key findings:
Baseline Data Collection for UNICEF
Intervention Aimed at Reduction
HIV Vulnerability of
Youth People in Papua, 2003**

HIV/AIDS Situation in Papua (Dec 2003, Health Off Papua Prov)

Age	HIV (+)	AIDS	Total
< 1	7	3	10
1 - 4	3	10	13
5 - 14	9	3	12
15 - 19	92	43	135
20 - 29	375	199	574
30 - 39	196	145	341
40 - 49	51	48	99
50 - 59	19	20	39
> 50	5	2	7
na	155	13	168
Total	912	486	1,398

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Background

- The Papua HIV and AIDS cases currently account for 25% and 43% of total reported cases in the country.
- In a recent study of 165 Papuans, 27% reported having had sexual intercourse by the age of 15, and 67% by the age of 19 (Butt, 2002). Only 15% (n=26) of respondents had ever used a condom (Butt, 2002).
- This study has the goal of reaching junior secondary school students with LSE in Papua. Prior to expanding the coverage of the LSE, UNICEF wishes to undertake data collection among junior secondary school students and other key informant such as teachers, parents and representatives of youth NGOs/CBOs in five districts in Papua.

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Objectives :

The overall objective of this study is to provide baseline data for the design of the specific content of the in school life skills education (LSE) for HIV prevention and care intervention in the province of Papua.

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Method

Quantitative data:

- Survey with structure questionnaire
- Sampling with PPS
- Junior high school students (N=2100 persons)
- Entry by EPI-6 and Analysis by SPSS

Qualitative data:

- In-depth and FGD
- Students, Teacher, Community leader (total informant= around 200 persons)
- Entry by Easy-text and content analysis

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6. Key findings: Baseline Data Collection for UNICEF Intervention Aimed at Reduction HIV Vulnerability of Youth People in Papua, 2003

- Rachel Odede, HIV/AIDS Project Officer, UNICEF Indonesia

Sample Size

District	BSS Survey Samples	Semi-Struc. interview	Focus Group Discussion/ In-depth interview Samples				Total
			Teacher	Students		Com. Leaders	
				Boys	Girls		
Biak Numfor	420	9	2 gr	2 gr	2 gr	3 ps	6 gr
Jayapura	420	7	2 gr	2 gr	2 gr	3 ps	6 gr
Jayawijaya	420	8	2 gr	2 gr	2 gr	3 ps	6 gr
Monokwari	420	7	2 gr	2 gr	2 gr	3 ps	6 gr
Sorong	420	6	2 gr	2 gr	2 gr	3 ps	6 gr
Total	2100 stud	37 school principles	10 gr 61 teach.	10 gr 66 stud.	10 gr 72 stud.	15 inf.	30 gr, 214 inf.

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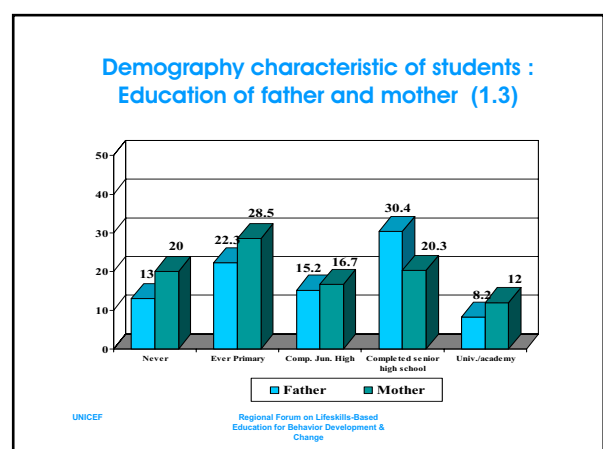
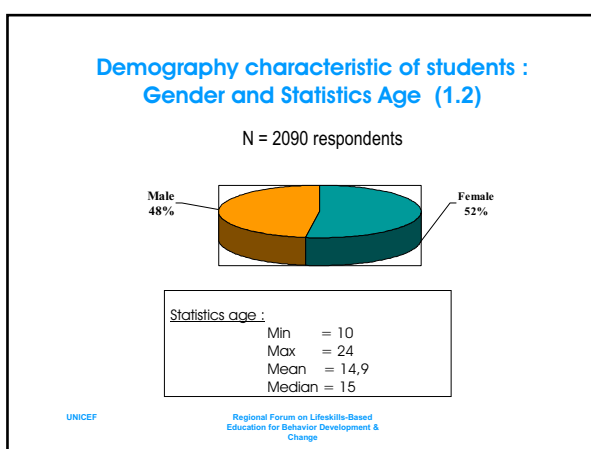
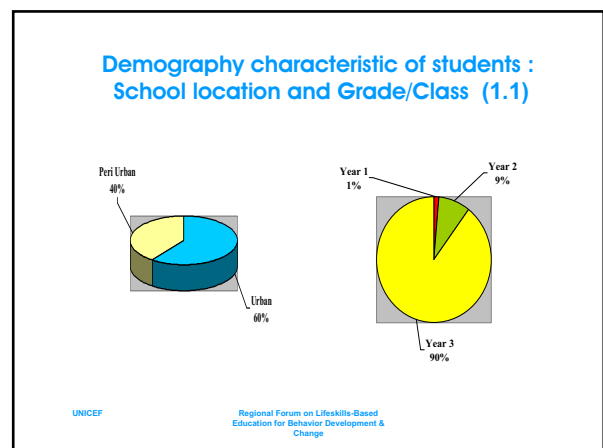
Key Findings

The following summarizes the results from:

- the school based student survey, and
- the in-depth and focus group discussions with students, teachers, and community leaders.

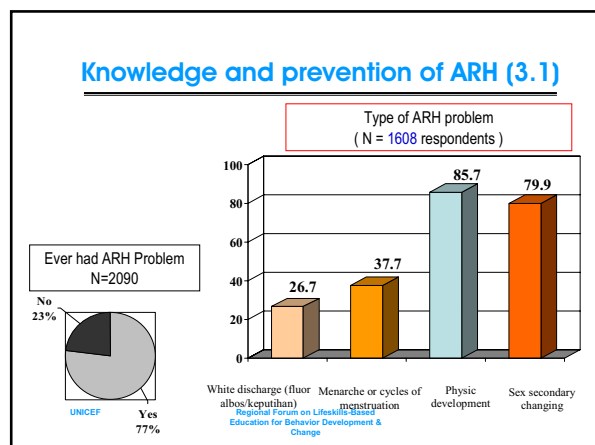
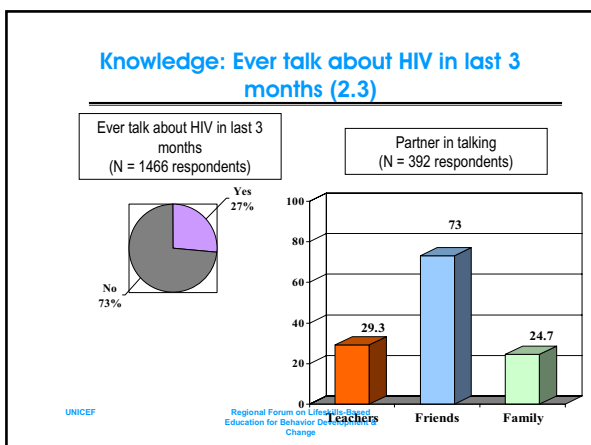
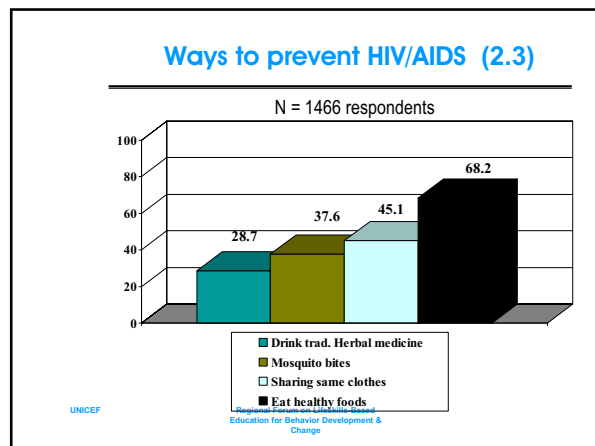
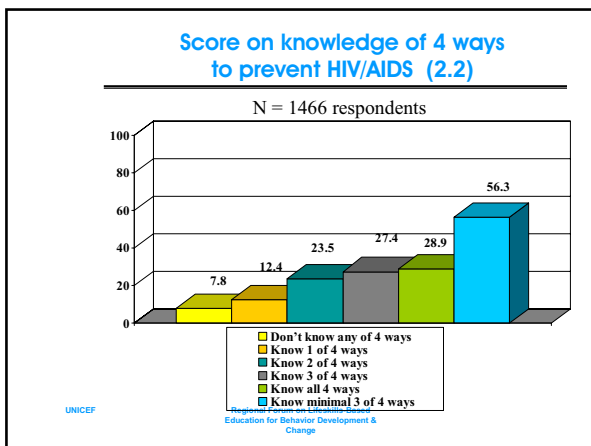
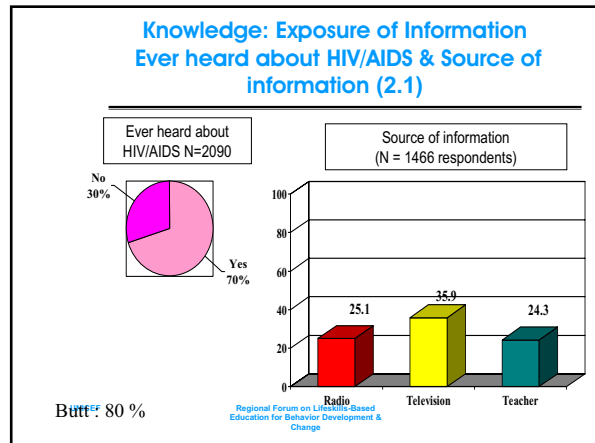
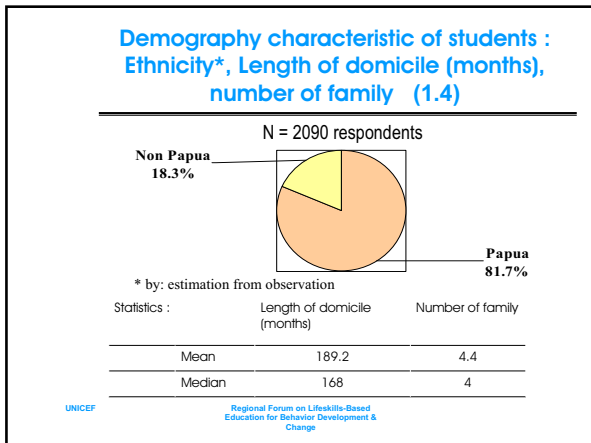
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- ### School based student survey (1)
- The respondents
 - Sources of and exposure to information
 - Knowledge about ARH
 - Early sexual behaviors
 - Sexual risk behaviors
 - Lifestyle related health risk
 - Attitude on life skills
 - Knowledge about LSE
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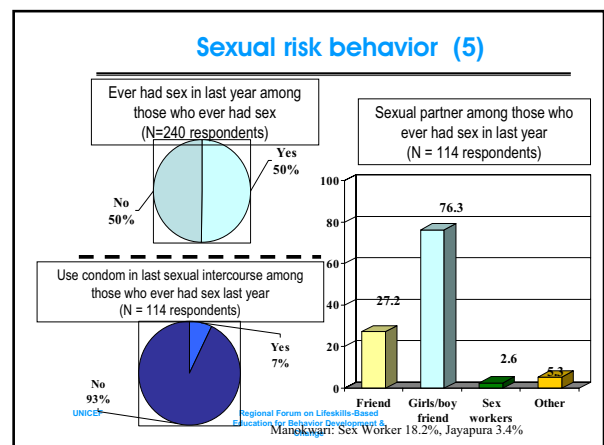
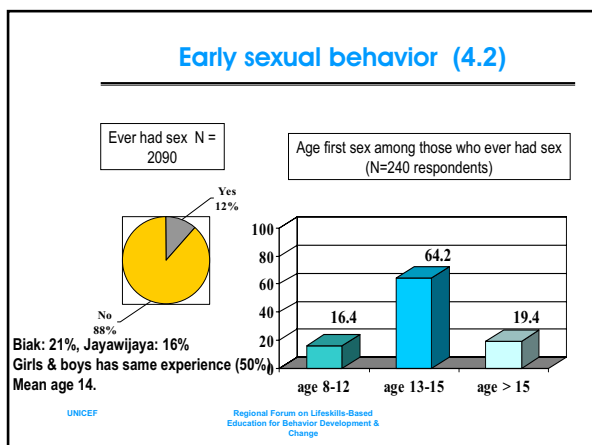
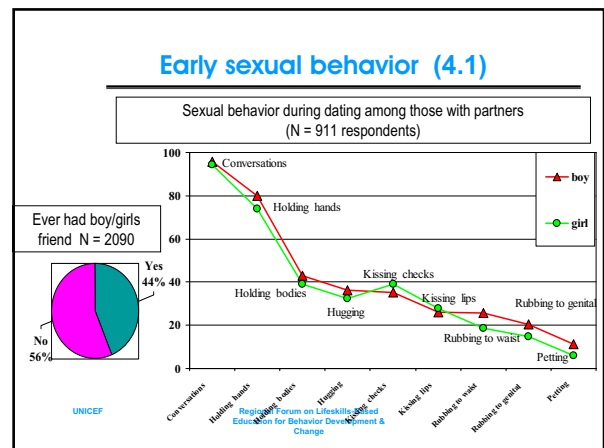
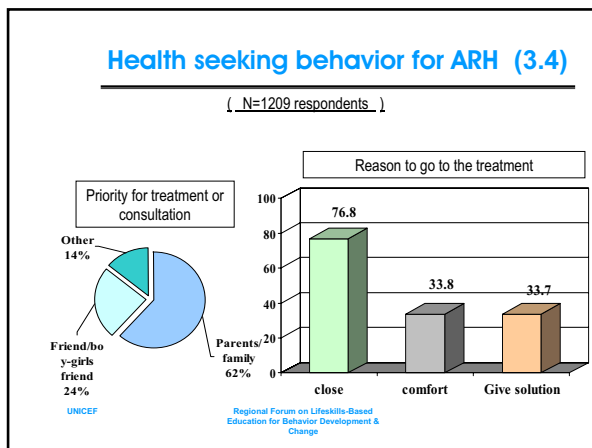
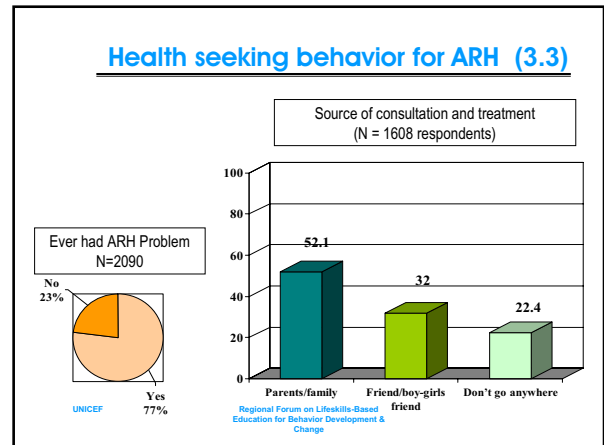
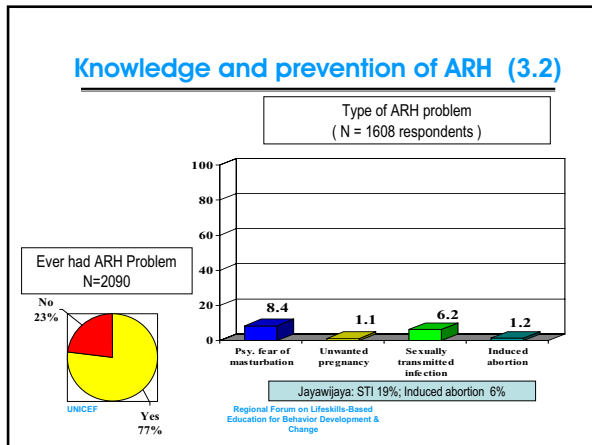
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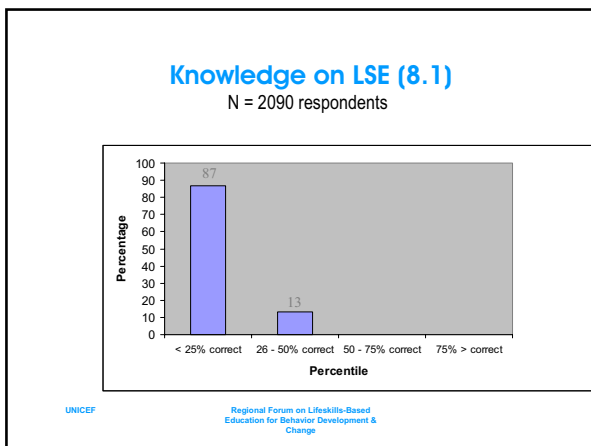
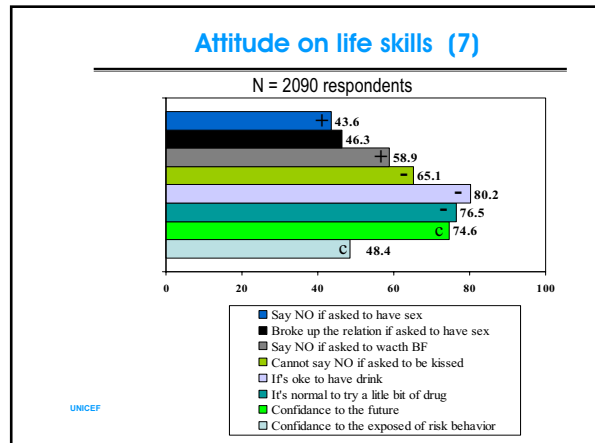
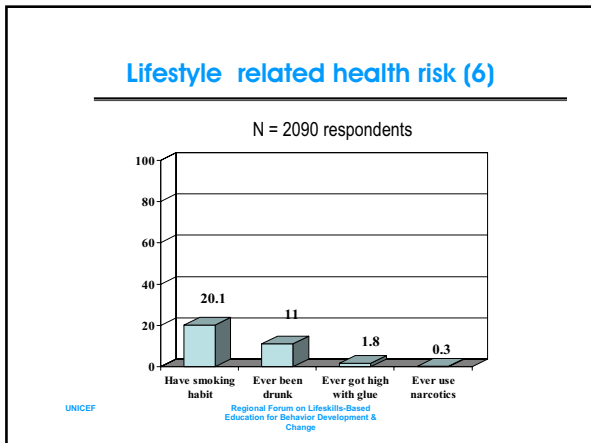
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- ### Recommendations
- Intervention of HIV/AIDS prevention in junior High School level is a must in Papua
 - Health education at school must be intensified
 - Support the schools to make extra curricular activities to increase the adolescent activities
 - Use audio-visual media to expose the students with HIV/AIDS information
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- ### District Specific Recommendation
- Jayawijaya (16%) and Biak (21%) must have additional intervention besides LSE at school
 - Jayawijaya must have specific intervention that are culturally sensitive
 - Intervention by local NGO's
 - Intervention using involvement by the tribe's leader and religious leader
 - Biak must have intensive health education at school about HIV/AIDS and ARH, because HIV knowledge is low compare to others
 - Strengthening health NGO's activities
 - Manokwari although has the lowest risk behavior but most of them have first sex with CSW (18.2%) -> Strengthening NGO's intervention in the localization
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Results of In-depth & FGDs

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The in-depth and FGD (1)

ADOLESCENT PERSPECTIVE

- The adolescent's knowledge about reproductive health is adequate
- Girls are more aware of their own reproductive health problems than boys, STI topic was raised by some boys.
- Delinquency helps to promote health risk
- The adolescent awareness about HIV/AIDS is good, but the misperception is still high and detailed information is low
- Adolescents need reproductive health service as a place to ask about reproductive and sexual problems.

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The in-depth and FGD (2)

TEACHER PERSPECTIVE

- Premarital sex is one of the major adolescent problems
- The role of government is only *lip service*, services from other institutions still incidental and more reactive
- The role of school is still limited to inserting reproductive health and HIV/AIDS issues incidentally in certain courses
- Not all of the teachers are ready to give reproductive health and sex education
- Teachers knowledge about HIV/AIDS is adequate and there were little misperceptions about it
- Adolescents are very vulnerable to HIV/AIDS since premarital sex is part of their life style
- Preventing HIV/AIDS should begin from the family by giving attention and strong religious basis, besides health education in the school.

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The in-depth and FGD (3)

COMMUNITY LEADER PERSPECTIVE

- Alcohol and free-sex are the most common problems facing adolescents
- The role of government is still weak in preventing adolescent risk behavior
- Awareness about HIV/AIDS is high but the detail knowledge HIV/AIDS is low
- Adolescents are very vulnerable to HIV/AIDS because of their psychology
- HIV/AIDS prevention must be sensitive to the cultural barriers, must be sustained and must be collaborated with various institutions and also involving the community

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Recommendations (1)

- Life Skill Education (LSE) modules must be tried-out in a pilot area, especially in rural areas since traditional norms is still stronger than in urban areas.
- It is recommended to add a topic about unwanted pregnancy since it is the most frequently noted problem in the community.
- It is recommended to the schools to initiate reproductive health group as one of the extra curricular activity, after the school has implemented the LSE training for the student.

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Recommendations (2)

- It is recommended to strengthening the knowledge and skills of the teachers by conducting training for them. The teachers should be supported with adequate materials in disseminating the information to other teachers. Teachers could also be encouraged to initiate a local team to disseminate reproductive health information in the community.
- It is recommended to make special interventions in certain areas, such as Jayawijaya, with a particular cultural approach.
- It is recommended to push the police in controlling the distribution of alcohol and drugs among the adolescent.

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Recommendations (3)

- The involvement of NGOs and religious sectors in implementing the Life Skill Education and IEC on HIV/AIDS is a must in order to expand the effectiveness of the prevention programs.
- It is recommended to persuade the local governments and the community to provide facilities and activities relevant for the adolescents.
- For the rural areas, it is recommended for the schools to increase adolescent programs that are tied to income generating activities.

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7. The State of Behaviour and Life Style of Pacific Youth

- Johnson George Toa, Senior Education Officer, Ministry of Education, Youth Development and Training, Vanuatu

THE STATE OF BEHAVIOUR AND LIFE STYLE OF PACIFIC YOUTH

BY JOHNSON TOA
SENIOR EDUCATION OFFICER
MINISTRY OF EDUCATION, YOUTH
DEVELOPMENT AND TRAINING -VANUATU

BACKGROUND OF SURVEY

- ◆ PARTNERSHIP WITH UNICEF PACIFIC, GOVERNMENT ORGANISATIONS AND YOUTH STAKEHOLDERS IN 2001
- ◆ AIM: TO OBTAIN EVIDENCE TO ASSIST THE EFFECTIVE DELIVERY OF PROGRAMMES OF YOUNG PEOPLE IN THE REGION
- ◆ OUT OF SCHOOL AND IN SCHOOL YOUTHS
- ◆ SAMPLE: 4596 STUDENTS +424 YOUNG PEOPLE FROM SHEFA
- ◆ AGE GROUP: 15 -24 YEARS
- ◆ QUESTIONNAIRE AND GROUP INTERVIEW

SUBSTANCE ABUSE (TOBACCO AND ALCOHOL)

FREQUENCY	SEX	13YEARS[%]	15YEARS [%]
EVER SMOKED	BOYS	17.4	33.6
	GIRLS	6.7	16.8
DAILY SMOKING	BOYS	1.1	0.9
	GIRLS	0.0	0.3
WEEKLY SMOKING	BOYS	3.5	6.1
	GIRLS	1.8	3.9
NEVER CONSUMED ALCOHOL	BOYS	79.8	65.8
	GIRLS	85.0	79.2
BEEN DRUNK 2 OR MORE TIMES	BOYS	1.4	3.5
	GIRLS	0.4	1.9

NUTRITION

FOOD AND DRINKS	MORE THAN ONCE A DAY(%)	ONCE A DAY(%)	AT LEAST ONCE A WEEK BUT NOT DAILY(%)	SELDOM (%)	NEVER(%)
Tea	17.5	62.2	6.0	11.5	2.8
coffee	6.3	20.3	10.9	50.0	12.6
Coconut Juice	21.3	10.3	24.3	42.8	1.3
Fruit	34.7	13.6	16.7	33.4	1.6
Soft drinks	5.8	8.1	13.2	51.5	21.5
Sweets	26.2	73.8	0	0	0
Fresh vegetables	42.3	25.8	13.9	18.5	1.5
White bread	18.8	43.7	8.1	23.5	9.6
Faro	21.6	14.3	21.7	40.8	1.6
Tinned fish	21.0	17.1	16.5	40.9	4.5
Tinned mutton/some & beef	8.2	9.4	12.9	44.6	24.9
Fresh mutton	1.7	2.9	5.9	37.7	51.8
chicken	10.4	12.9	22.2	49.7	4.8
water	85.1	8.0	2.9	3.6	0.5

PHYSICAL ACTIVITY

FREQUENCY	NUMBER	%
EVERY DAY	607	13.4
4 - 6 TIMES A WEEK	376	8.3
2 -3 TIMES A WEEK	1013	22.3
ONCE A WEEK	1145	25.2
ONCE A MONTH OR LESS	1395	30.8

PHYSICAL ACTIVITY

NUMBER OF HOURS OR EXERCISE IN A WEEK	NUMBER	%
NONE	1028	22.6
ABOUT ½ AN HOUR	1066	23.5
ABOUT 1 HOUR	1207	26.6
ABOUT 2 -3 HOURS	908	20.0
ABOUT 4-6 HOURS	200	4.4
7 OR MORE HOURS	134	2.9

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PHYSICAL ACTIVITY

NUMBER OF HOURS OF WATCHING TV IN A DAY	NUMBER	%
NOT AT ALL	787	17.3
UP TO 1 HOUR	1637	35.9
1 -3 HOURS	1550	34.0
4 HOURS OR MORE	584	12.8

SUMMARY OF FINDINGS



- ◆ POTENTIAL TO OBTAIN MEASURES OF HEALTH AND LIFESTYLE NEEDS AND RISKS
- ◆ HIGH INVOLVEMENT OF YOUTH IN THE RESEARCH DESIGN AND IMPLEMENTATION
- ◆ WILLINGNESS OF YOUTH TO PARTICIPATE [HUMAN RESOURCE STRENGTH]
- ◆ OPPORTUNITY FOR OWNERSHIP OF PROGRAMME ENHANCES SUSTAINABILITY
- ◆ SUCCESSFUL RESEASRCH LEADS TO DESIGN OF LIFESKILLS PROGRAMMES
- ◆ RESULT PROVIDES THE BASIS FOR COMPARISON OF PAST PRESENT LIFESTYLES

SUMMARY CONTINUED...

- ◆ DATA AN IMPORTANT SOURCE OF IDENTIFYING HEALTH NEEDS AND SKILLS AMONG YOUTHS
- ◆ PERIODIC IMPLEMENTATION OF SURVEYS – MONITORS EMERGING YOUTH ISSUES
- ◆ MOBILISATION OF FUNDING AGENCIES – GOVERNMENT COMMITMENT TO FUND OTHER FUTURE SURVEYS

8. State of the Philippine Population Report 2, Pinoy Youth: Making Choices, Building Voices



- Auralyn Anorico, UNFPA, Philippines, and Ema Naito, UNICEF Philippines

**State of the Philippine Population
Report 2**

**PINOY YOUTH: *Making Choices,
Building Voices***



**Auralyn Anorico (UNFPA)
and
Ema Naito (UNICEF)**

Brief History of SPPRs



- SPPR 1 (2000): *Time to Act, Needs, Options, Decisions*
- SPPR 2 (2004): *Pinoy Youth Making Choices, Building Voices*

- ✓ Based on various studies done on adolescent and youth situation
- ✓ Has 2 versions: Popular and Technical
- ✓ Developed in consultation with various sectors (GOs, NGOs, academe, young people's representative)
- ✓ Was validated thru FGDs



Activities related to its popularization

- Launched nationally (with media coverage)
 - National Population Congress
 - Creative Launch (Concert)
 - SPPR webpage (www.popcom.gov.ph)
 - Presentation to the House of Congress
- and Locally (regional and provincial)
 - Users' Fora
 - Media Campaign

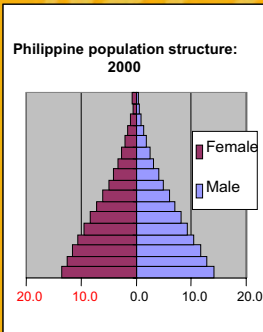
Intended uses of Pinoy Youth

- ✓ A tool for policy advocacy
- ✓ Basis for programming
- ✓ A venue to thoroughly discuss young people's issues

The Filipino Adolescents: Demographics

Philippine population structure:
2000



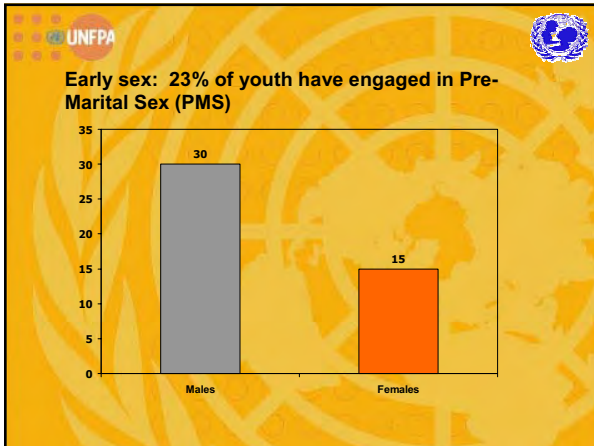
- **1/5 of the population are 15-24 yrs old**
 - in absolute numbers: 16.5 million
 - By 2030, adolescent population in the Philippines is estimated to reach 30 million
- **They are many and growing very fast in numbers**




Transit Young People's Risky Behaviours

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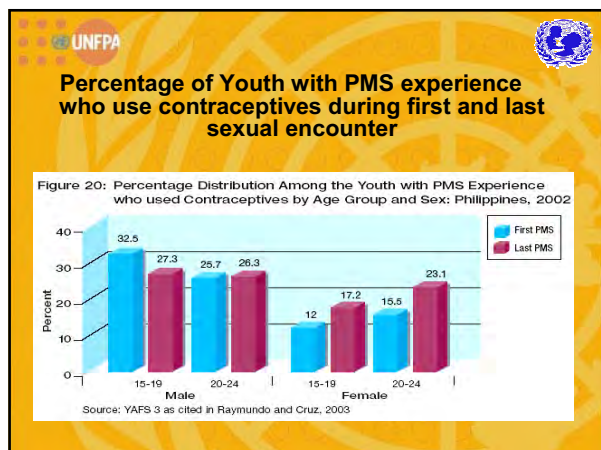
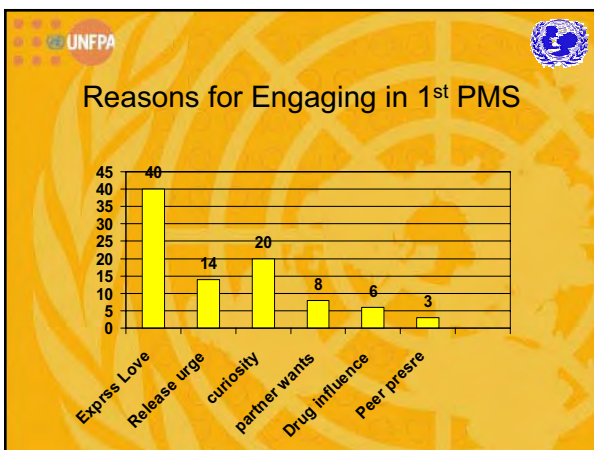
- Auralyn Anorico, UNFPA, Philippines, and Ema Naito, UNICEF Philippines



- **Percentage of sexually active young adults**
 - About 1/5 or 23% of young people reported to have had PMS. The prevalence among boys is double than that of girls (31.1% vs. 15.4%, respectively)
 - The gap between the PMS experiences of males and females is getting narrower. In 2002, the prevalence of PMS among boys is just double that of girls. In 1994, males report of PMS was 2.25 times that of females (18%)

- **Casual sex is practiced more by males than females**
 - 54% of sexually active adolescents had sex with the same partner
 - Males tend to have more than one sexual partner than females (49% vs. 11%)

- **School level when 1st PMS occurred**
 - 20% while in high school
 - 13% while in college
 - 13% after HS graduation
 - 3.5% while in elementary school
- **Average Age at First Sexual encounter**
 - 1982-94: 18 years old
 - 2002: 17.5 years old



8. State of the Philippine Population Report 2, Pinoy Youth: Making Choices, Building Voices

- Auralyn Anorico, UNFPA, Philippines, and Ema Naito, UNICEF Philippines

UNFPA

Common Contraceptive Methods Used During 1st and Last Sex Encounter

First Sex	Last Sex
<ul style="list-style-type: none"> • 21% used a method 	<ul style="list-style-type: none"> • 25% used a method
Details <ul style="list-style-type: none"> • 40.5% used condom • 39% withdrawal • 11.1% pills • 6.2% rhythm 	Details <ul style="list-style-type: none"> • 38.2% used condom • 31.9% withdrawal • 16.6% pills • 8.2% rhythm

UNFPA

Consequences of Risky Behaviours

Pregnancy during adolescence

- Increasing incidence of pregnancy/child bearing among teenagers (9%-1993 NDHS to 11% in 1998 NDHS)
- Young pregnancies account for 30% of all pregnancies, 6% of spontaneous abortion, 3 out of 4 maternal deaths, and 74% of all illegitimate births (w/ 21% contributed by 15-19 y/o; and 53% by 20-24 y/o group)

UNFPA

ABORTION

- Estimated about 400,000 abortions are performed every year. In a hospital study, 36% of these cases belong to the young women's group (15-24 years old)

Reasons for Having Abortion given by single youth:

- Studying-22%
- Fear of parents – 20%
- Father of child is married 14%

UNFPA

Methods used:

- Cytotec – 40%
- Taking prescribed drugs – 16%
- Taking herbs & related concoctions – 9%
- "Hilots" – 29%

UNFPA

RH Problems Including STDs

Most common among female adolescents:

- Dysmenorrhea (56.3%)
- Irregular menstrual period (37.5%)
- Painful urination (19.1%)
- Abnormal vaginal discharge (5.9%)

Most common among male adolescents:

- Painful urination (23%)
- Itching in the genital area (12.9%)
- Infection from circumcision (2.7%)
- Genital warts or ulcers (2.9%)

UNFPA

General Findings

- Youth are having more liberal views about sex and related matters
 - Approval of PMS is at substantial levels but the double standard between genders remains (40%)
 - Live-in arrangements are acceptable (20%)
 - Pregnancy w/o marriage is acceptable (15%)
 - More than 1/3 (37.5%) will support the bill legalizing divorce w/o gender variation
- Awareness of AIDS for both sexes is near universal (95%)
- Misconceptions about the curability of AIDS had worsened
 - 1994: 12%
 - 2002: 28%

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Partners involved in the Design and Implementation

- (1) Government
 - Population Commission
 - NEDA
 - DOH
 - NSO
 - NYC
 - DSWD
- (2) Non-Government
 - CARD
 - FPOP
- (3) Academe
 - UPPI
- (4) UNFPA 9 Provincial Partners, and 7 NGOs in 4 key cities



Plans to conduct Similar Study

- SPPR 3 (Nov 2004): Urbanization and Local Governance
- SPPR 4 (2005): Migration
- YAFS 4 (?)



Maraming Salamat Po!