Joint Programme on Rights-Based Approach to Adolescent & Youth Development in Ethiopia: Phase II (2014 –2017)

Background

About 33% of Ethiopian populations are aged 10-24 years, with nearly 22% of them being adolescents, aged between 10 and 19 years. At least 90% of the unemployed in Ethiopia are youth below the age of 30 years. There is now national recognition of the importance of investing in the economic needs, rights and aspirations of adolescents and creating the space for them to engage in national development. Sexual and Reproductive Health problems, including HIV, remain to be the main challenges affecting adolescents and youth, with lack of skills, unemployment, and illegal migration acting as compounding factors.1

Ethiopian youth have sexual debut at an early age and early marriage especially for the girl child is a common occurrence in most of the rural areas in the country (EDHS, 2011). Young people, in particular female youth, continually face risks such as poverty, HIV/AIDS infection, domestic violence, sexual harassment, and harmful traditional practices like Female Genital Mutilation/Cutting (FGM/C), gender discrimination and abduction. Furthermore, gender inequality is prevalent in Ethiopia because of socio-economic, cultural, and societal obstacles and barriers among girls and women. They are also more likely to have limited access to basic social services such as education, HIV/SRH related services and livelihoods.2

In response to HIV and SRH young girls’ and boys’ problems, the government of Ethiopia has developed various laws, policies and strategies. Though, shortage of resources, limited infrastructure and services in addressing issues of SRH and HIV remain the key challenges to youth development the government is making unwavering efforts to translate its policies into action. To complement Government efforts in addressing adolescent and youth issues, the 2007-2013 Norwegian funded Joint Programme (JP) managed through UNICEF and UNFPA has made tremendous contribution in responding to the identified SRH problems, including HIV/AIDS prevention and development needs of young people. This was made possible by full engagement of young people as right holders and building the capacity of governmental and non-governmental institutions as duty-bearers to fulfil claims of the most vulnerable.

Phase I of Joint Programme

Major Achievements

These interventions made it possible to reach more than 636,710 adolescent and young people with direct livelihood, life skills and SRH/HIV services through youth centres, health institutions and educational institutions including universities as of June 2012. Of the total young people who received direct services of various SRH/HIV interventions during the last four years, 52 per cent were male and 48 per cent were female. In addition, more than 3.5 million young people were also reached through mass media (TV, radio, edutainment and print media). The support also included provision of start-up seed funds for income generating activities (IGA) for more than 8,133 (69 per cent female) marginalized and vulnerable young people.

In terms of coverage, the JP covered 12 of the 40 public universities (30 per cent) and 25 high spot areas in 25 woredas in 5 regions with the different components of livelihoods, SRH and HIV/AIDS prevention activities (JP annual reports 2007-2012). The five years JP (2007-2013) has exceeded its target of (200,000) by three-fold (636,710).

1 National Youth Policy Implementation Status Assessment, MOWCYA in collaboration with UNICEF & UNFPA, December 2012, AA.
2 Ethiopian Demographic and Health Survey, 2011
UNICEF and UNFPA support federal and regional partners to provide combination prevention activities for young people, including mass media and interpersonal communication activities such as community conversation, youth dialogue, and peer education, school-based life skills education, and health services in universities. These interventions are designed to increase risk perception and risk reduction skills among young people, in particular girls. However, as identified in the mid-term review of Phase I of the programme, access to quality SRH and HIV services remains a challenge for adolescent girls and needs to be improved. Also, the specific barriers to achieving positive programme outcomes for girls must be better explored and addressed. The strong ownership and leadership of the government at different levels, continuous follow up from the central offices; effective and workable strategies designed by the JP to reach young people (particularly those hard to reach) can be sited as contributing factors for surpassing target set for the five years project period.

Phase I of the Joint Programme was implemented through both federal and selected Regions (Addis Ababa, Amhara, Oromia, SNNPR, and Afar) coordinating bodies and implementing partners with an emphasis on youth-focused capacity building, youth friendly service provision, promotion of youth participation, awareness building and addressing socio-cultural factors which encourage prevailing risky behaviours. The remarkable achievements realized in the Programme areas have raised the need for concerted efforts not only to sustain the gains made but also to expand to the majority of adolescents and youth in the country that still remain in need of youth empowerment initiatives.

**Phase II of the Joint programme**

**Goals**

Phase II JP, also funded by the Government of Norway, will focus on a rights based approach to adolescent and youth in 30 selected woredas, 16 higher education institutions and 100 secondary high schools in Amhara, Oromia, SNNPR, Afar and Tigray regions, as well as Addis Ababa City Administration. The JP also addresses gender inequalities such as limited young women and girl's participation, access to SRH/HIV services and low economic empowerment through social protection, improving access to justice, livelihood opportunities.

This phase builds on the experiences gained from the previous JP (2007-2013) implemented by UNICEF and UNFPA and funded by the Norwegian government. The proposed JP directly contributes to UNDAF outcomes 7 (improved access to HIV prevention, treatment, care and support); 11 (capacities of national, local and community institutions strengthened for participatory and evidence-based planning, implementation, monitoring and evaluation, leadership and decision making) and; 12 (increase the participation of women and youth in advocacy, social mobilization and decision making, as well as benefitting from livelihood opportunities and targeted social services, and women and youth have increased access to rights-based information, d of SRH/HIV services).

**Targets and expected results**

The phase II JP aims to reach 403,000 adolescents girls and boys by creating a sustainable and enabling environment, which will result in the enhancement of young people’s capacity, making it possible for them to claim their rights and access an integrated package of youth-friendly services.

A total of 100,000,000 Norwegian Kroner (more than USD 17 million) will be used to achieve the following results:

- Close to 176,000 adolescents and young girls’ and boys’ participation increased in programme through capacity building and active participation so that they will be able to claim for their rights.
- Around 215,000 adolescents and young girls’ and boys’ access to increased direct HIV prevention and SRH services in youth centres, educational and Health facilities by 2017.
- About 13,000 adolescents and young girls’ and boys’ economically empowered by receiving livelihood support and income generating activities. Totally 403,167 adolescents and young girls and boys receive direct services on SRH and HIV/AIDS/STI services including GBV.
- Three million adolescents and young girls’ and boys’ access SRH/HIV and youth empowerment information indirectly through mass media, electronic and print media etc.