



MEMA kwa Vijana

Good things for young people

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MEMA kwa Vijana (MkV) is an adolescent sexual and reproductive health (ASRH) programme working in schools, health facilities and communities.

MkV has over ten years research and implementation experience in Mwanza region, Tanzania.

MkV aims to provide policymakers and programme managers with evidence and recommendations on effective interventions for preventing HIV and improving the sexual health of young people.

Designing & Developing Community Interventions

1 Introduction

Previous work within both the first (MkV1) and second phase (MkV2) of the MEMA kwa Vijana project identified a need for community interventions to support ongoing activities within schools and health facilities. Formative intervention research is taking place as part of MkV2 in order to develop complimentary community interventions based on rational design. These complementary interventions aim to create an environment within the wider community that supports ASRH activities in schools and health services and strengthens community attitudes and behaviours that promote ASRH. Young people continue to have unsafe sexual relationships, and do so at an early age. Various individual beliefs and attitudes about sexual activity influence their decision-making and risk-taking. These beliefs are in turn influenced by community factors. Interventions should target behaviour change in community groups so that the community supports positive decisions and reduced risk among youth and assists in creating a safe and healthy environment.

Community norms approve of:

- Abstinence amongst school pupils
- Female sexual respectability
- Taboos around the discussion of sex

Youth face contradictory norms about sexual activity.

Youth are also challenged by several widely held expectations:

- Sexual activity is inevitable unless prevented
- Sex is a female economic resource
- Restrictions on sexual activity are relaxed at festivals and social gatherings
- Young men's esteem and prestige grows through sexual experience.

2 Methods

- Community level research: Focus group discussions (FGDs) and In-depth interviews (IDIs) in 4 villages (one in each district: Kwimba, Sengerema, Misungwi, Geita)
- Research within the school environment: In total 87 IDIs were conducted (20 Health Worker, 13 Ward Education Coordinator, 16 Academic Teachers, 16 Guardian Teachers, 18 Head teachers and 4 Teachers). In addition, 25 FGDs/Group Interviews were conducted with Teachers.
- MkV2 arranged a workshop aimed to bring different stakeholders together to share experiences and learn lessons in order to develop appropriate strategies.
- Literature review of community-based HIV interventions and parenting interventions is ongoing.
- The proceedings from an October WHO meeting in Geneva on parenting interventions has informed future steps.
- We are also sharing information on parenting interventions with 'Family Matters' (Kenya), and Regai Dzive Shiri (Zimbabwe), a community randomized control trial.



For more information on this, or any other details concerning MEMA kwa Vijana, please contact:

Dr Florence Temu,
Country Director,
AMREF Tanzania

FlorenceT@amreftz.org

Jenny Komrower, MkV2
Research Coordinator, NIMR, Tel: +255
28 2503 012/+255 28
2500 399
Email:

j.komrower@liverpool.
ac.uk

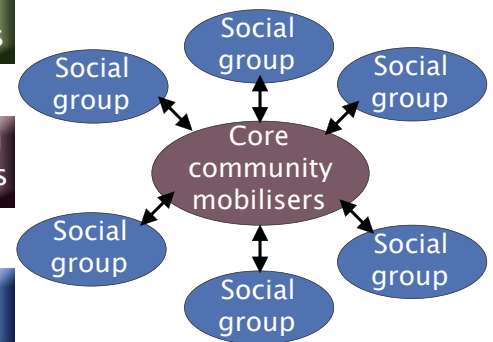
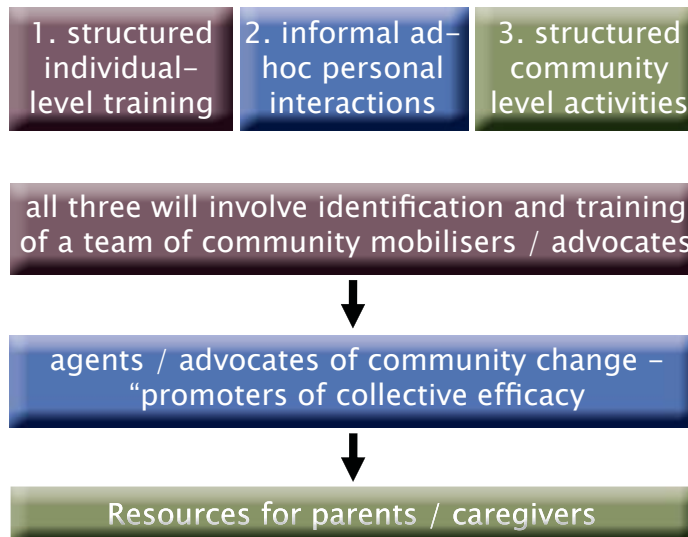
Pieter Remes, MkV2
Community Interventions
Coordinator, National Institute for
Medical Research, Tel:
+255 28 2503
012/+255 28 2500
399,

pieter@sphsu.mrc.ac.uk

3 Key Findings

| Internal factors / behavioural | External factors / environmental |
|--|---|
| <ul style="list-style-type: none"> • Low parental monitoring • Low parental provision • Low level of ASRH education (youth & parents) • Beliefs about ASRH | <ul style="list-style-type: none"> • Lack of community-based communication channels of ASRH information • Lack collective efficacy • Poor communication between parents and school/committees • Contradictory social norms regarding ASRH • Lack of coordination from village authorities • Risky leisure and recreation • Poverty, unequal power and gender relations |

4 Structure of the proposed parenting / community intervention



5 Conclusions

The importance of various different factors were highlighted during these preliminary steps of the formative intervention research. These include the following:

- **Ownership:** Community participation in designing and implementation of intervention is a strategy for ownership
- **Sustainability and Replication:** Community intervention are not isolated entities and therefore require involvement of government structures at all levels
- **Appropriate:** Operational research will assist community and local government structures to identify and integrate successful programs.