

DSW

Deutsche Stiftung
Weltbevölkerung



AFYA YANGU SHULE YANGU PROJECT

Overall Objective

Reduction of teenage pregnancy

Results

Life skills

Access to SRHR information

Peer education approach

- Community support

- Youth-friendly

AFYA YANGU SHULE YANGU PROJECT

Implemented in Dodoma City Council:
January to December 2021

KEY FINDINGS FROM THE PROJECT ENDLINE
EVALUATION STUDY

DECEMBER 2021

DSW
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Debate session during the Interschool competition



Debate session during the Interschool competition

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1.0 INTRODUCTION

The “*Afya Yangu Shule Yangu*” project is a one year pilot project which aims to ensure that adolescents aged 15-19 years in secondary schools in Dodoma City Council have increased SRHR knowledge and access to youth-friendly SRH-services, and contributing to a reduction of teenage pregnancies in Tanzania. Moreover, the project focuses on supporting the Government efforts by following a comprehensive approach that addresses the issues of adolescent health.

The major drivers for adolescent pregnancy in Dodoma region had been documented to include:

- Inadequate information on SRHR: Government efforts to provide SRHR information and services in schools are insufficient. Teachers in schools have not been trained on youth-friendly SRHR information provision and communication. In addition, girls and boys feel more comfortable talking to their peers, who equally do not have correct knowledge on SRHR.
- Limited access to youth-friendly SRH services: Teenagers who became pregnant in Tanzania had limited access to youth-friendly SRH services and data shows that only one in ten adolescent girls aged 15 to 19 years was using any modern method of contraception.
- A non-supportive community environment towards adolescents' SRHR needs: Family members, parents and guardians are often influenced by socio-economic and cultural drivers. Child marriage is a harmful traditional practice that exposes teenage girls and young women to the risk of early pregnancy. Gender inequality and social norms manifest themselves in the form of rape and coercive sex resulting in teenage pregnancy, which sometimes even leads to social stigma and rejection from their parents and communities.
- A lack of translation of existing policies into practice: Technical staff and leaders including CSOs do not utilize their legislative role to ensure that young people's SRHR are prioritized in the county's development, health and budget plans.

1.1 Overall Objective of the Project

To contribute to the improvement of health and well-being of adolescents by advancing the implementation of Tanzania's National Adolescents Reproductive Health and Development Strategy 2018-2022.

1.2 Specific Objective of the Project

A scalable project approach is tested by the end of the project, ensuring that the target beneficiaries, the adolescents aged 15-19 years in secondary schools in Dodoma City have increased SRHR knowledge and access to youth-friendly SRH-services, and contributing to a reduction of teenage pregnancies in Tanzania.

1.3 Project Sites

The “*Afya Yangu Shule Yangu*” project was planned to cover five Administrative Wards, and in each Administrative Wards one secondary school and one health facility were identified and then sensitized and prepared to implement this project. Table 1.1 below presents the project intervention sites by Administrative Wards, Secondary Schools and the Health Facilities.

Table 1.1: The “*Afya Yangu Shule Yangu*” project interventions sites

Administrative Wards	Secondary School	Health Facility
Chamwino	Chinangali Sec School	Chamwino Dispensary
Makutupora	Makutupora Sec School	Makutupora JKT Dispensary
Mbabala	Mbabala Sec School	Mbabala B Dispensary
Mkonze	Mkonze Sec School	Mkonze Health Centre
Ntyuka	Ntyuka Sec School	Ntyuka Dispensary

Moreover, to facilitate an unbiased validation of the cause-and-effect relationship of the interventions that were planned and implemented by the project, five comparison wards with pre identified secondary school and health facility were identified during the baseline assessment. Table 1.2 below presents the project comparison sites by Administrative Wards, Secondary Schools and the Health Facilities.

Table 1.2: The “Afya Yangu Shule Yangu” project comparison sites

Administrative Wards	Secondary School	Health Facility
Kikuyu Kaskazini	Kikuyu Sec School	Kikuyu Dispensary
Tambukareli	Sechelela Sec School	Railway Dispensary
Mpunguzi	Mpunguzi Sec School	Matumbulu Dispensary
Msalato	Chikole Sec School	Msalato Dispensary
Mnadani	Miyuji Sec School	UMATI Dispensary

2.0 IMPLEMENTATION OF PROJECT ACTIVITIES BY RESULT AREAS

The “*Afya Yangu Shule Yangu*” project had three Key Result Areas planned to be achieved within one year of implementation, and these Key Result Areas were tagged to the Specific Objective of the Project.

Result Area 1: 1,040 adolescents in five secondary schools have access to age-appropriate SRHR information through peer education

This Key Result Area had four activities under it, and all were geared towards the facilitation of the key result of facilitating 1,040 adolescent in five secondary schools have access to age-appropriate SRHR information through peer education. Foremost five school health clubs were established followed by the identification and training of 40 peer educators, followed by accommodating 208 adolescent per school (8 peer educators, 120 girls and 80 boys) from each of the five secondary schools into school health clubs, and then conduct peer learning sessions to adolescent girls' and boys' in-school health clubs. The process of implementation of these activities is summarised in the table below.

Table 2.1: Implementation of the planned activities under Key Result Area 1

Sn	Planned Activity	Achievement	Score
1.1	Establish/strengthen five School Health Clubs in target schools	Five School Health Clubs were established (each club composing of 208 members: 8 peer educators, 120 girls and 80 boys); a total of 1,040 adolescents.	100%
1.2	Conduct training for 40 peer educators (8 per school – 6 girls and 2 boys)	40 students were trained to be Peer Educators (8 per school: 6 girls and 2 boys).	100%
1.3	Support the 40 peer educators to conduct peer learning sessions in in-school health clubs	A total of 40 peer educators were supported to conduct peer learning sessions to adolescent girls' and boys' in-school health clubs	100%
1.4	Develop/adapt and disseminate 3,000 SRHR IEC materials	3,263 visibility and IEC Materials were distributed (Fliers, leaflets, T-shirts, caps, clinical coats, notebooks, and school bags)	109%

Result Area 2: Secondary Schools and target communities provide a supportive environment where adolescents have access to appropriate SRH services.

Four specific activities were conducted under this Key Result Area, and they include training of 15 contact teachers, conduct a three-day training to 10 health service providers on youth-friendly SRH services, Conducting 10 interactive health talks, and conducting 10 dialogue events with community. The process of implementation of these activities is summarised in the table below.

Table 2.2: Implementation of the planned activities under Key Result Area 2

Sn	Planned Activity	Achievement	Score
2.1	Train 15 contact teachers	15 contact teachers (7 male and 8 female) from the five selected secondary schools and 2 Government officials received the training.	100%
2.2	Conduct a three-day training to 10 health service providers on youth-friendly SRH services	10 Health Services Providers and 2 Government officials (District Reproductive Health Coordinator (DRCHCO) and School Health Coordinator) were trained.	100%
2.3	Conduct 10 interactive health talks – 2 in each school – to link adolescent girls to SRHR counselling services	10 interactive health talks were facilitated to the 5 secondary schools to link adolescent girls to SRHR counselling services.	100%
2.4	Conduct 10 dialogue events with community	10 Community Dialogues events conducted at Mkonze, Chamwino, Makutupora, Mbabala and Ntyuka wards	100%

Result Area 3: Project innovations, approaches and methodologies are widely documented and disseminated to key stakeholders

This Key Result Area was planned to be concluded with the implementation of four activities, namely Conducting 3 stakeholders meetings at district level, Documentation of best practices, convened a Round table consultation meeting with Region Secretariat, and conducted dissemination event to 50 key stakeholders. The achievements of these activities is summarised in the table below.

Table 2.3: Implementation of the planned activities under Key Result Area 3

Sn	Planned Activity	Achievement	Score
3.1	Conduct 3 stakeholders meetings at district level with Government Officials, partner organizations, project beneficiaries and key implementers	3 stakeholders meetings were conducted in Dodoma City Council engaging Government Officials, partner organizations, project beneficiaries and key implementers.	100%
3.2	Document best practices	Best practices were identified and documented (Stakeholders Engagement, Peer Education approach, creating ownership in strengthening school health clubs, Community Entry Protocol through creating sustainability, Strengthening communications, coordination and capacity (CCC), Community Dialogues and Integration Sectoral Engagement.	100%
3.3	Round table consultation meeting with Region Secretariat	Round table discussion was conducted to facilitate DSW Tanzania to share the project highlights with Region Secretariat Officials.	100%
3.4	Conduct dissemination event to 50 key stakeholders	A dissemination event was convened by DSW Tanzania with 80 key stakeholders (project beneficiaries, partner organizations, Government Officials from the Ministry, Region, District and Ward).	160%



Peer Debate

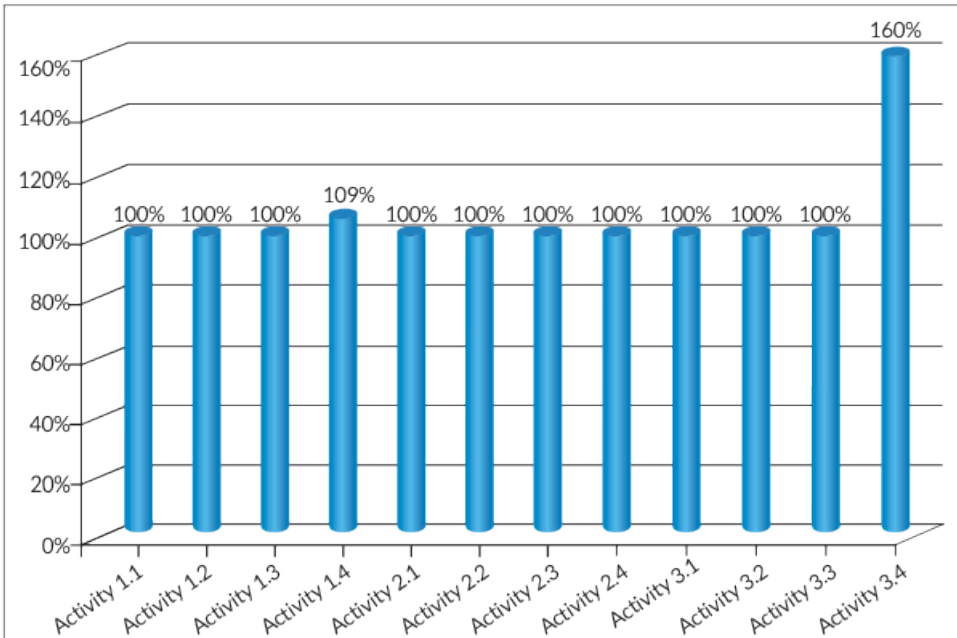


Health Service Providers after AYFHS training

Conclusion

The DSW Tanzania implementation reports for the “*Afya Yangu Shule Yangu*” project document that all 12 planned under Result Areas 1, 2 and 3 were implemented. Their implementation results show that, almost all of them attained their planned targets as summarized in table below.

Figure 2.1: Implementation of the planned activities under all Key Result Areas



3.0 ATTAINMENT OF THE PLANNED PROJECT PERFORMANCE INDICATORS

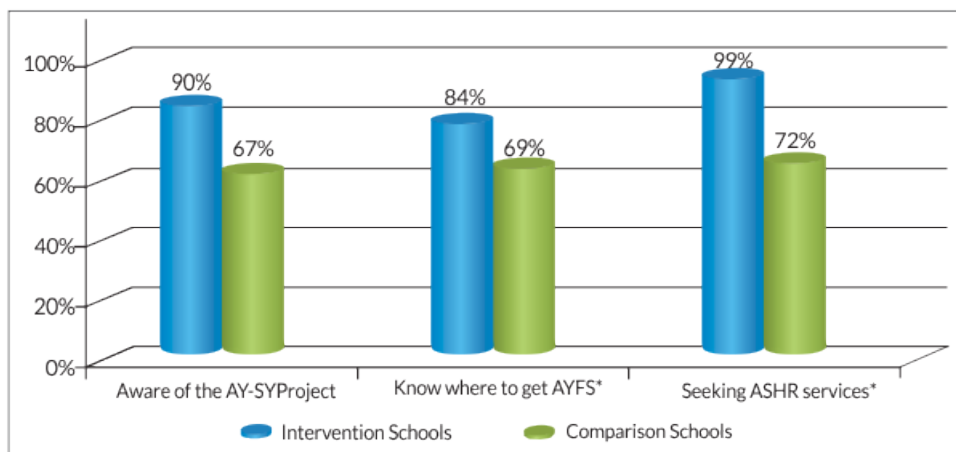
3.1 Adolescents aged 15 - 19 years reporting increased access to SRH services within the target communities by the end of the project

Among others, the end line evaluation study wanted to establish if the in school adolescents aged 15 to 19 were aware of the “*Afya Yangu Shule Yangu*” project that was being implemented at five intervention schools, namely Chinangali, Mbabala, Makutupora, Mkonze and Ntyuka secondary schools. The results show that the majority (90%) of in school adolescents aged 15 to 19 at the intervention secondary schools were aware of the “*Afya Yangu Shule Yangu*” project. At the comparison secondary schools (Kikuyu, Sechelela, Mpunguzi, Chikole and Miyuji Secondary Schools), only two thirds (67%) of in school adolescents aged 15 to 19 were aware of the “*Afya Yangu Shule Yangu*” project (and this difference is statistically significant, $p < 0.0001$).

Information collected from in school adolescents age 15 to 19 show that there is a marked increase of the proportion of them who know about the availability of adolescent and youth friendly services. The end line evaluation show that the majority (84%) of the in school adolescents age 15 to 19 at the interventions secondary schools knew about the availability of adolescent and youth friendly services, as compared to 69% at the comparison schools (and this difference is statistically significant, $p < 0.0001$).

Furthermore, the finding from the in school adolescents age 15 to 19 show that, during the end line evaluation, almost all (99%) of the in school adolescents age 15 to 19 at the interventions secondary schools reported an increased access to SRH services, as compared to 72% of the in school adolescents age 15 to 19 at the comparison secondary schools (and this difference is statistically significant, $p < 0.0001$). These findings are summarised in Figure 3.1 below

Figure 3.1: Knowledge of the availability of AYFS and seeking ASR services



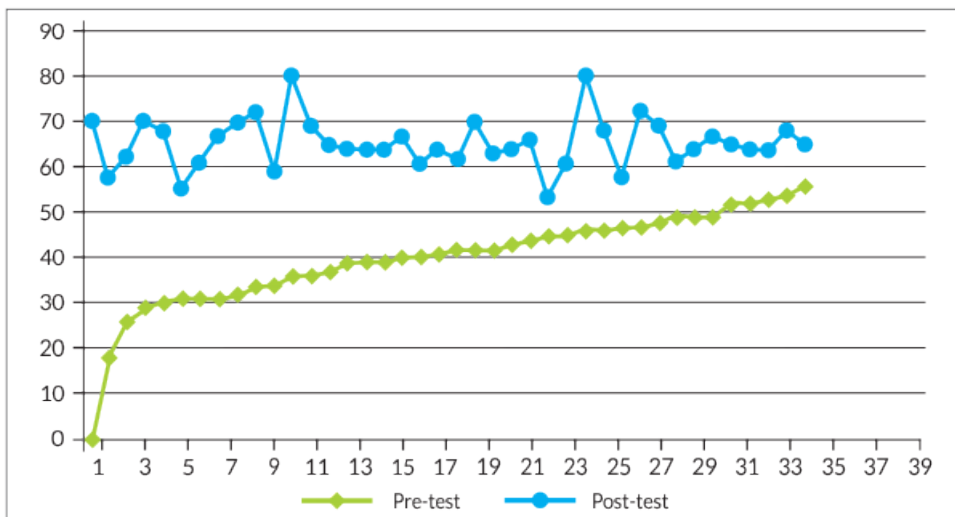
* Statistically significant difference, $p < 0.0001$

3.1 Increased of knowledge on SRHR amongst peer educators by the end of the project.

During the lifetime of the project, the “*Afya Yangu Shule Yangu*” project recruited, trained and supported 40 Peer Educators to conduct peer learning sessions to adolescent girls' and boys' in-school health clubs. The SRHR issues on which they were trained included: menstrual hygiene, early pregnancy, drug abuse, STI's, Gender and Sex, Female Genital Mutilation (FGM), Gender Based Violence (GBV), life skills, and Reproductive organs. The topics are relevant to adolescent youth in supporting health club sessions and empower adolescent youth on reduction of early pregnancies. Before the 40 Peer educators score on knowledge about these SRHR ranged from 18% to 54% with a mean score of 41%.

During the post test at the end of the training, the 40 Peer educators score on knowledge about these SRHR ranged from 53% to 80% with a mean score of 65%. These findings show that the training of the Peer Educators significantly increased their SRHR knowledge from an average of 41% to 65% registering an overall 66% increase in SRHR knowledge among the recruited and trained Peer Educators, and the “*Afya Yangu Shule Yangu*” project contributed to this dramatic increase on SRHR knowledge among Peer Educators. Figure 3.2 provides a summary of the Pre and Post test scores of Peer Educators on ASHR knowledge..

Figure 3.2 Pre and Post test scores of Peer Educators on ASHR knowledge

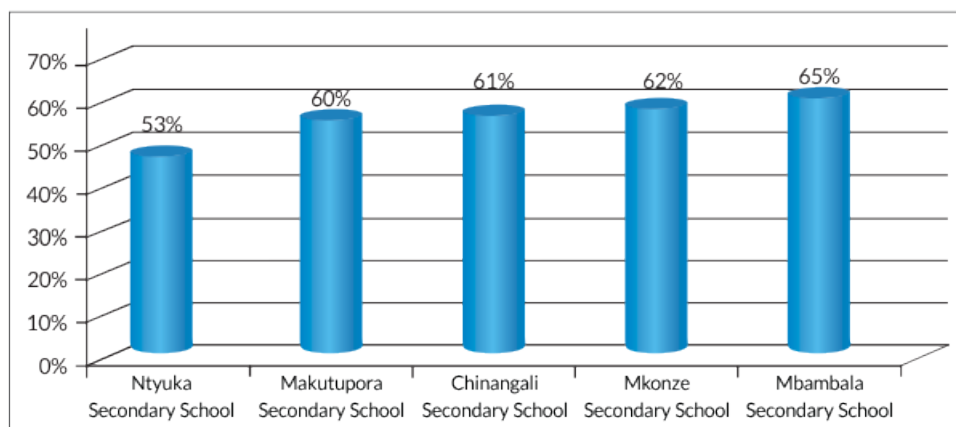


3.2 Increase of knowledge on SRHR amongst youth club members by the end of the project.

The “*Afya Yangu Shule Yangu*” project established one School Health Club at each of the five intervention secondary schools. Each School Health Club brought together 208 members that included 8 peer educators, 120 girls and 80 boys making a total of 1,040 in school adolescents. Upon excluding the 40 Peer Educators, the “*Afya Yangu Shule Yangu*” project facilitated bringing together 1,000 in school adolescents. Among these, the “*Afya Yangu Shule Yangu*” project conducted a pre post-test to 811 in school adolescents (81% of total) that include from 143 in school adolescents at Chinangali, 143 in school adolescents at Mbabala, 165 in school adolescents at Makutupora, 139 in school adolescents at Mkonze and 221 in school adolescents at Ntyuka secondary schools.

The Pre Post test results showed that there was an average increase of knowledge on SRHR among the School Health Club members that ranged from 53% among School Health Club members at Ntyuka secondary school to 65% among School Health Club members at Mbambala secondary school with a mean 60% increase. Figure 3.3 provides a summary of the mean percentage increase of Pre and Post test scores among School Health Club members at the five intervention secondary schools.

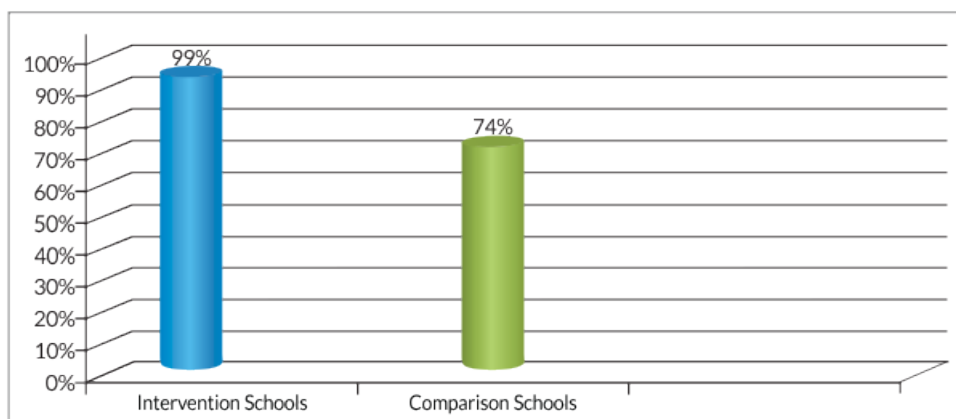
Figure 3.3: Mean percentage Increase of SRHR knowledge amongst School Health Club members



3.3 Targeted adolescents aged 15 - 19 years reporting increased support regarding their SRHR in their communities by the end of the project.

Furthermore, the finding from the in school adolescents age 15 to 19 show that, during the end line evaluation, almost all (99%) of the in school adolescents age 15 to 19 at the interventions secondary schools reported an increased support regarding their SRHR in their communities, as compared to 74% of the in school adolescents age 15 to 19 at the comparison secondary schools (and this difference is statistically significant, $p < 0.0001$). These findings are summarised in Figure 3.4 below

Figure 3.4: Reported increased support regarding their SRHR in their communities



3.4 Good practices documented by DSW Tanzania by the end of project

During the operationalization of the *“Afya Yangu Shule Yangu”* project, DSW Tanzania identified and documented a set of best practices realized during the implementation of the project, and these include:

- Stakeholders Engagement
- Peer Education approach,
- Creating ownership in strengthening school health club,
- Community Entry Protocol through creating sustainability,
- Strengthening communications, coordination and capacity (CCC),
- Community Dialogues
- Integration Sectoral Engagement.

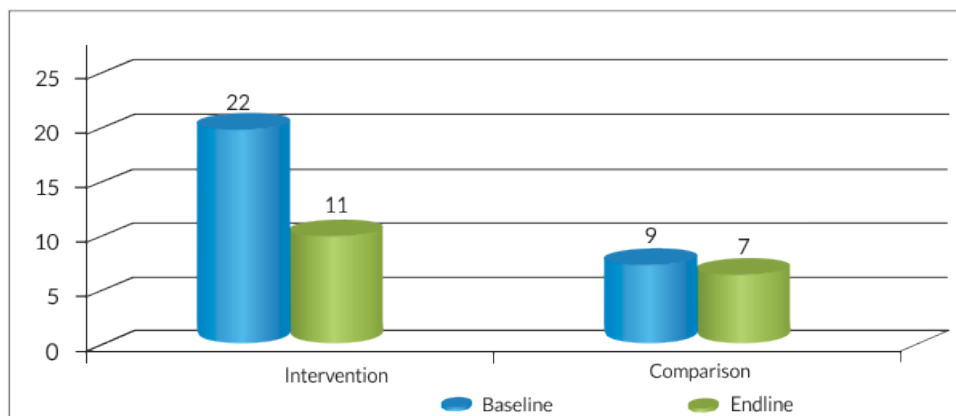
3.5 Reduction of incidences of pregnancies among in school girls

Mandatory pregnancy test for in school girls during the beginning of the term, and any time in between was noted to be almost universal at both the intervention secondary schools (89%) and the comparison secondary schools (89%) during both the baseline and the end line study.

The baseline study found that there were 22 in school girls at the intervention secondary school were reported to be pregnant during the period January to December 2020; and 9 in school girls at the comparison schools were reported to be pregnant. One year latter during the end line study, 11 in school girls at the intervention secondary school were reported to be pregnant during the period January to October 2021; and 7 in school girls the comparison schools were reported to be pregnant. These findings show that at the end of the operationalization of the *“Afya Yangu Shule Yangu”* project, the incidences of pregnancies among in school girls had dropped by 50% among the intervention secondary schools and by 22% among the comparison secondary schools. These findings suggest that the *“Afya Yangu Shule Yangu”* project interventions that had messages that encourage reducing pregnancies among in school adolescents age 15 to 19 did contribute to these gains, and thus also contributing to a reduction of teenage pregnancies in Tanzania. Figure 3.5 shows the number of reported in school pregnancies during as documented by the baseline and end line studies.

However two schools, Makutopora in the intervention wards and Mpunguzi in the comparison wards were noted to have a surge of in school pregnancies from none during the baseline study. Figure 3.5 shows the number of reported in school pregnancies during as documented by the baseline and end line studies.

Figure 3.5: Number of reported in school pregnancies during baseline and endline studies



3.6 Young adolescents aged 15 - 19 years are demanding contraceptives by the end of the project.

As afore indicated, the project covered some selected secondary schools and health facilities in the selected wards. The same arrangement was observed in the comparison ward. It was the expectation of the project that the interventions being implemented at the target administrative wards, secondary schools, and health facilities would result into increased uptake of condoms and contraceptives among adolescents (age 15 to 19) in the communities.

Health services delivery data collected during the baseline and end line assessment at the intervention and comparison secondary schools, and health facilities show that there had been an observed surge of number of adolescents (age 15 to 19) in the communities up taking condoms and contraceptives at the health facilities. The data show that the number of adolescents (15 to 19 years) who received condoms at intervention health facilities increased from 13 to 152; whereas at the comparison health facilities it increased from 23 to 588.

Moreover the number of adolescents (15 to 19 years) who received contraceptives at the intervention health facilities increased from 520 to 662; whereas at the comparison health facilities it increased from 206 to 339. This information is summarized in Figure 3.6A and 3.6B present this information.

Figure 3.6A: Number of adolescents (15 to 19 years) who received condoms during baseline and endline

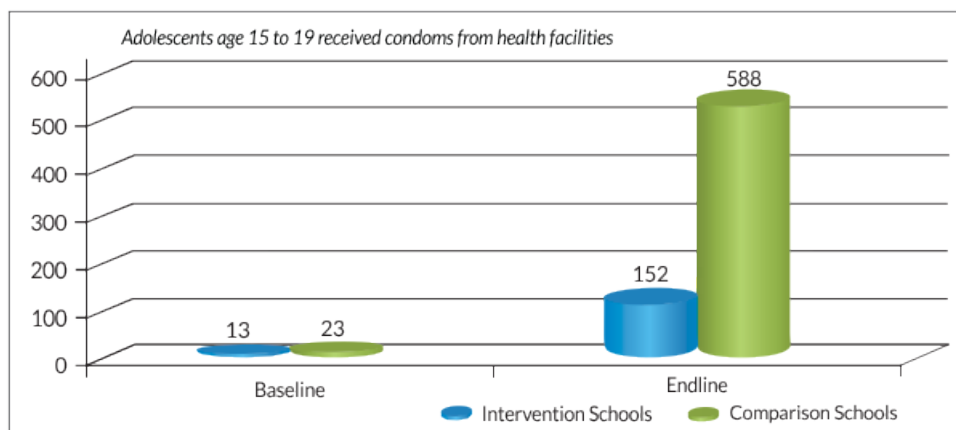
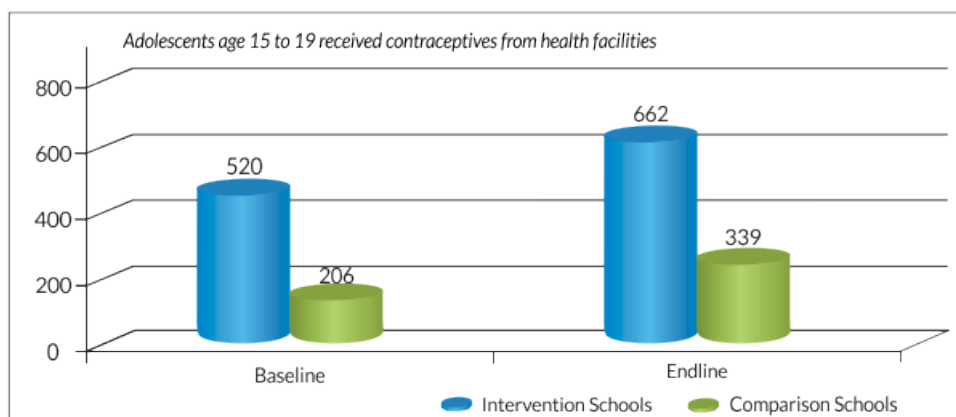


Figure 3.6B: Number of adolescents (15 to 19 years) who received contraceptives during baseline and endline



These findings suggest that the “*Afya Yangu Shule Yangu*” project may have contributed to the influencing of adolescents age 15 to 19 years to visit the health facilities and receive contraceptives.

3.7 Key Stakeholders Insights about the “Afya Yangu Shule Yangu” project.

All key stakeholders (in school adolescents, community leaders/parents, teachers, service providers, LGA official, Regional Secretariat officials and Central Government officials); were asked about the relevance, effectiveness, efficiency, and sustainability of the project. They overwhelmingly noted that this project was relevant for the wellbeing of the adolescents. The following are samples of what these key stakeholders said about the project.

i) Relevance of the “Afya Yangu Shule Yangu” project

“The project inputs are relevant for the adolescents, both in school and out of school as to prepare them for their adult life” – FGDs with community leaders and parents / guardians, Mkonze Ward.

“The project had drastically increased the SRHR knowledge among in school adolescents, and had also contributed to increased self-esteem among in school adolescents, and more importantly had contributed to the reduction of early pregnancies” – Government Official, Dodoma District Council.

ii) Effectiveness of the “Afya Yangu Shule Yangu” project

“The in school adolescents that were being targeted by this project had enabled them to raise their knowledge on SRHR, benefits of refraining from early sex, and the consequences of pregnancy during adolescence” – Secondary School Teacher, Intervention Schools.

“The project has provided the in school adolescents with adequate SRHR education which enables some of them to further educate fellow adolescents and thus empowering them on positive steps to undertake to safeguard their health and prevent early pregnancies” – Government Official – Dodoma Region Secretariat

iii) Efficiency of the “**Afya Yangu Shule Yangu**” project

*“The use of school teachers and health facility service providers to participate in provision of SRHR education to in school adolescents was a very good innovation for reinforcing the message and building trust on the received message among the in school adolescents” - **Health Facility Service Providers – Interventions Health Facility.***

*“The involvement of all stakeholders, notably Department of Education and Department of Health was a good approach in terms of the project administration and implementation of activities, and the involvement of in school adolescents to participate in discussion about SRHR issues was very innovative” - **Government Official, Dodoma District Council.***

iv) Sustainability of the “**Afya Yangu Shule Yangu**” project

*“Using of written agreements (memorandum of understanding) to facilitate the engagement of stakeholders was one of the best steps to ensure the sustainability of the project after the conclusion of the funding” - **Central Government Official.***

*“The project initiatives of increasing the SRHR knowledge among in school adolescent are expected to continue since DSW Tanzania had laid out the foundation for that through capacity building of the school teachers, health service providers and the adolescent students themselves, so we expect them to continue implementing” - **Government Official – Dodoma Region Secretariat.***

*“The inclusion of SRHR elements in the school timetable and the availability of fellow in school adolescent with capacity to teach others (peer educators) are some of the pillars for the sustainability of the key project activities after the conclusion of the project” - **Secondary School Teacher, Intervention Schools.***



1. Group work - Teachers ToT training
2. Interschool Competition - Educative Sports Event
3. Group Photo - Youth Champion and Peer Educators during the commemoration of the International Day of the Girl Child
4. Stakeholders' Round Table Workshop
5. Learning Session in Health Club
6. Peer Educators Capacity Development



4.0 CONCLUSION AND RECOMMENDATIONS

The “*Afya Yangu Shule Yangu*” project was designed with an Overall Objective of contributing to the improvement of health and well-being of adolescents by advancing the implementation of Tanzania's National Adolescents Reproductive Health and Development Strategy 2018-2022. More specifically, this project aimed at ensuring that the target beneficiaries, the adolescents aged 15-19 years in secondary schools in Dodoma City have increased SRHR knowledge and access to youth-friendly SRH-services, and contributing to a reduction of teenage pregnancies in Tanzania. The results from the end line evaluation show that:

- i) The project implemented all the planned activities and successfully reached the planned targets.
- ii) The branding of the project facilitated it being well known in the intervention schools.
- iii) The project facilitated in creating high level of awareness on availability of adolescent and youth friendly sexual and reproductive health services.
- iv) The project was successful in increased access to SRH services to adolescents' age 15 to 19 year.
- v) The project successfully increased the knowledge on SRHR amongst peer educators.
- vi) The project successfully documented the best practices that were successfully tested during implementation.
- vii) The project successfully increased the knowledge on SRHR amongst school health club members.
- viii) The project successfully contributed to the reduction of incidents of in school pregnancies in the intervention schools.
- ix) The project successfully contributed to the increased uptake of contraceptives among adolescents age 15 to 19 in the communities.

Recommendations

The “*Afya Yangu Shule Yangu*” project was designed with insight of being scalable in terms of expanding the innovative approaches. This expansion can take dimensions of expanding the reach (including more administrative wards, secondary schools, and health facilities) and expanding the menu of ASRH services that can be provided to adolescents to satisfy their unmet needs.



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