

Youth Engagement: For Bringing Positive Social Change Among Adolescents on Reproductive Health

USAID Adolescent Reproductive Health (ARH) Program



Adolescent girls at the UDAAN Center

Program Snapshot

Life of Project: 2022 – 2025

Geographical Focus: 60 municipalities across 11 districts in 3 provinces: Madhesh (41), Lumbini (12), Karnali (7)

Prime Partners: CARE Nepal

Consortium Partners: Howard Delafield International (HDI), Jhpiego, Associations of Youth Networks of Nepal (AYON), Nepal Contraceptive Retail Sales (NCRS) Company

Digital Partners: Social Awareness Center Nepal (Surkhet), Dalit Development Society (Salyan), Rural Development and Awareness Society Nepal (Rolpa), BEE Group (Banke), Mallarani Rural Development Concern Center (Pyuthan), Aasaman Nepal (Dhanusha), CNRD (Rautahat), Bagmati Welfare Society Nepal (Sarlahi),

About the Program

USAID Adolescent Reproductive Health (ARH) was a three-year (initially five-year), USAID-funded project led by CARE Nepal in partnership with HDI, Jhpiego, AYON, and Nepal CRS Company from 2022 to 2025. The project supported the Government of Nepal (GoN) in improving adolescents' reproductive health with the goal of empowering adolescents (10-19 years) to reach their full potential and practice healthy reproductive behaviors. To achieve these goals, USAID ARH employed multichannel social and behavior change strategies, including group-based interventions, interpersonal communication, and youth- and girl-led activism for reproductive health and social norms change, supported by service linkages amplified by digital interventions.

The Government of Nepal launched the National Adolescent Health and Development Strategy in 2018 to address key issues identified in the Nepal Demographic and Health Survey, particularly the high rates of adolescent marriage and pregnancy. The strategy underscores the critical need to create an environment that promotes healthy reproductive health practices among adolescents. In 2022, the GoN reinforced this effort by endorsing the Adolescent-Friendly Reproductive Health Services Guidelines. Aligned with these national initiatives, USAID ARH collaborated with federal, provincial, and municipal governments in Madhesh, Lumbini, and Karnali Provinces to improve the reproductive health of adolescents aged 10-19, with a focus on disadvantaged populations.

Youth Engagement for Bringing Positive Change amongst Adolescents on Reproductive Health

Nepal faces several obstacles in adolescent reproductive health (ARH) due to cultural taboos, limited access to adolescent-friendly healthcare services, gaps in sexuality education in institutions, and a lack of adolescent-friendly features such as privacy and confidentiality. Cultural norms stigmatize adolescent sexuality, making it difficult for adolescent boys and girls to get accurate information and support. Practices like child, early, and forced marriage (CEFM) increase the risks of early pregnancies and violence against women and girls, affecting girls' and boys' control over their own lives and well-being. With limited support systems, many adolescents—particularly from disadvantaged communities—struggle to find confidential and affordable reproductive health services.

To address these issues, Nepal needs targeted strategies that provide adolescent-friendly healthcare, better sexuality education, and inclusive policies. By prioritizing these changes, Nepal can protect and promote young people's reproductive rights and well-being, despite existing cultural and systemic barriers. Furthermore, adolescents from disadvantaged communities, such as Dalits, Muslims, and disadvantaged Jana Jati ethnicity, experience compounded challenges due to socio-economic disparities and geographic isolation. These factors exacerbate their vulnerability to poor reproductive health outcomes and restrict their opportunities for personal development and empowerment.

The USAID ARH project aimed to reach the adolescent and youth groups, especially in Madhesh, Lumbini, and Karnali Province of Nepal, through adolescent and youth group interventions and wide range of approaches to assist adolescents reach their full potential by choosing and practicing healthy reproductive behaviors. The project aims to empower adolescents by enhancing empowerment and Skill Development, Community Mobilization, Sustainable Change, Addressing Social Norms, Policy Advocacy and Inclusive Approach.

Youth engagement is one of the key components of the project, which aims to successfully implement crucial initiatives under the youth mobilization component, by mapping existing youth platforms and

networks across USAID ARH's working provinces and municipalities, revealing the active presence of their active member organizations in the project implemented geographics. Similarly, adolescent groups and youth groups at the ward level were found in those working municipalities. Building upon this mapping, established at the municipal level, diverse and inclusive youth clubs engage many youth and serve as platforms for discussing adolescent and youth issues, engaging in policy dialogues, advocating for reproductive rights, and aligning local government financing with youth concerns. This initiative not only develops space for youth engagement but also provides a platform for developing and scaling up best practices in youth advocacy efforts.

What did we do?

Youth Club Mapping

As part of the project's efforts to enhance adolescent engagement, a comprehensive youth club mapping exercise was conducted across target municipalities. The primary aim of this exercise was to identify and understand existing youth groups and committees operating within these areas. The mapping process collects data on the demographic characteristics of adolescents, available engagement opportunities, levels of participation, challenges faced, and the aspirations of youth across different administrative levels. Additionally, we assessed the existing platforms, organizations, and structures that facilitate adolescent involvement in sectors such as education, health, governance, and social and cultural activities. The insights gained from this mapping exercise were shared with local municipality authorities to promote youth engagement in the development process, support informed decision-making, and foster collaboration across relevant sectors.

Formation of Youth Clubs: Based on the mapping results, youth clubs were established at the municipality level, totaling 120 clubs with both mixed and girls' groups across 60 rural/municipalities. Each club comprised 20-30 youth members aged 16-29 years, representing all wards and prioritized areas, including heterogeneous and girls' groups to ensure inclusivity and representation.



Youth Engagement: Youth actively participated in Social Analysis and Action (SAA) sessions at the ward level. With their agenda, they visited ward offices, municipality offices, health facilities, and secondary schools to seek their spaces in the committees and respective activities. By engaging in advocacy campaigns, community events, and structured programs like International Youth Day celebrations, Environment Day, Menstrual Hygiene Day and advocacy campaigns like door-to-door outreach and street dramas etc., youth not only amplified their voices but also contributed meaningfully to advancing initiatives aimed social and behavior change in improving adolescent reproductive health and overall community well-being.

Youth Mobilization and Leadership: Youth mobilization is pivotal in empowering community youth by actively involving them in local-level planning and decision-making processes and harnessing their skills through capacity-building trainings and orientations. This mobilization enabled youth to take ownership of issues affecting them directly, promoting a culture of leadership and advocacy within their communities.

Quarterly Meetings with Youth Clubs: Through the regular meetings of clubs under the USAID ARH project, youths are emphasizing their roles in advancing adolescent reproductive health. Follow-up

discussions at the ward level refined action plans and enhanced understanding of accessible family planning services, Adolescent Friendly Health Services (AFHS), and the Community Health Scoreboard (CHSB) process. Youth developed action plans and built team spirit through various leadership activities. Furthermore, the regularity of these gatherings underscores their importance as platforms for ongoing dialogue, where youth can collectively address challenges, discuss initiatives, and strategize for future endeavors. These quarterly meetings play a vital role in driving positive changes in adolescent reproductive health outcomes across municipalities by nurturing continuous engagement and empowering youth leadership.

Monthly Meeting with Youth Clubs: Youth groups have been established at the ward level in the prioritized areas by engaging SAA graduates, youth club members, and other young individuals interested in advocacy and campaigning. These groups hold regular monthly meetings to discuss action plans, key issues, and collaborate with local ward authorities and other stakeholders. During these meetings, the youth receive capacity-building on various topics, including family planning and reproductive health (FP/RH) rights, as well as youth-led CHSB initiatives, and digital interventions for awareness.

Kishor-Kishori Assembly: The assemblies provided a valuable platform for young people to share their ideas, raise concerns, and participate in shaping the future of their community. Till now, thirty Kishor Kishori Assemblies have been conducted where youth issues were identified and handed over to local/provincial governments. Adolescents gathered to discuss ARH and contextual issues. Similarly, commitments were signed by the stakeholders.

Development of Organization Development of Youth Club Training Curriculum: The team conducted two visualization workshops to discuss organizational needs and goals with 40 youth club members from three provinces. As a result, a tailored training curriculum was developed, and two Training of Trainers (ToT) sessions at the provincial level helped to sensitize 41 field team members on youth issues, organizational development, and advocacy. Later, fourteen training sessions were rolled out at the district level.

Collaborations with Nepal Youth Council (NYC) and Provincial Youth Council (PYC): Periodic discussions were held with the National Youth Council (NYC) and Provincial Youth Council (PYC) regarding the USAID ARH project, with a focus on enhancing youth engagement for improved health outcomes and positive social behavior change at federal, provincial, and local levels. As a result, NYC committed to endorsing the organizational development training manual. Three joint monitoring sessions were carried out by PYC and NYC, where they provided feedback that contributed to finalizing the training manual. Recently, NYC took a significant step by providing a foreword for the curriculum, demonstrating its ownership and support for this initiative.

What were the enabling factors?

Local Government Engagement: Orientation sessions and policy dialogues with municipal stakeholders reflected best practices in building local government ownership. This approach enhanced community involvement and helped align government financing mechanisms with youth concerns.

Youth Engagement and Participation: The active participation of youth and adolescents in various activities, including awareness campaigns, CHSB, Hub and Spoke, private health facilities, and policy discussions as a part of their agency-building and increasing accountability towards their community.

Collaboration and Coordination: The project was successful in how it approached collaboration and coordination with various stakeholders, including government departments, health facilities, schools, and

like-minded agencies. It also demonstrated the importance of engaging these stakeholders to have a holistic and sustained impact. The program engaged counterparts at various levels of governments and facilities to understand how to integrate work with youth clubs into ongoing planning and budgeting processes.

Inclusivity: The strategic formation of youth clubs with intentional diversity and inclusiveness ensured that the voices of all adolescents were represented in the community, including girls and people with disabilities.

What were the challenges?

Lack of Municipal Guidelines and Complex Registration Process: The municipality level lacks specific regulations or bylaws to register youth clubs, which caused the registration process of 120 clubs to be complex and varied across municipalities. This led to an increased burden on youth groups and delays in the registration process.

Dropout in Formed Youth Groups and Impact on Program Effectiveness: The increased dropout rates among youth in both mixed and girls' groups were a major challenge. This trend weakened the stability and continuity of affected groups. The loss of active members hampered ongoing activities and reduced the overall impact on the youth group and community engagement, which affected collaboration and diminished their ability to address local issues, and ultimately affected the success of their objectives.

Engaging the non-prioritized wards' youth participation in activities: The USAID Adolescents Reproductive Health Project implemented in six specific wards from each working municipality to ensure a targeted impact, yet youth from other wards also participated in the municipality-level club. This presented a challenge in keeping them consistently engaged due to the ward-focused activities, which made non-priority wards' youth feel less connected to the activities and required extra efforts in outreach and adaptable engagement strategies.

Challenges in Youth Agenda Prioritization Due to Lack of Policies and Councils: Without properly established youth policies and councils at both the provincial and municipal levels, the project team faced challenges in following appropriate channels and guidelines to prioritize youth agendas, including Adolescent Reproductive Health (ARH) services.

High Dropout Rates Among Females in Youth Groups Due to Family Responsibilities and Cultural Barriers: During the quarterly and ward meetings, it was seen that the dropout rate of female members aged between 25-29 years in both mixed and girls' youth groups was comparatively high. We found that this was due to most of them experiencing conflict due to their duties as housewives. Additionally, it was observed that some families did not easily allow the daughter-in-law to attend meetings and other activities due to traditional practices and perceptions.

What did we learn?

Effective Capacity Building: The quarterly meetings for youth club members have proven to be effective in improving their capabilities and involvement in local planning processes. These meetings have provided a platform for youth to gain new skills and knowledge, which has increased their engagement and productivity in the ARH program.

Community Mobilization and Advocacy: Events such as International Women’s Day, door-to-door campaigns, and Menstrual Hygiene Day celebrations have been instrumental in raising awareness and mobilizing the community. These activities have empowered youth clubs to take an active role in advocating for issues like preventing child marriage and promoting menstrual hygiene.

Youth Leadership and Policy Advocacy: The Kishor-Kishori assemblies at the municipal level provided a platform for adolescents to collaborate, take joint action, and engage in policy advocacy. These assemblies have been crucial in raising awareness about adolescent issues and collecting input from local government and development partners.

Organizational Development: Training sessions on organizational development have been essential in enhancing the capacity of youth clubs. These sessions have guided the process of registering youth clubs as organizations, which is crucial for their sustainability and effectiveness in community engagement.

Inclusive Approach: The project has emphasized the importance of including diverse groups in its activities, ensuring that all adolescents, regardless of their background or the ward they live in, have the chance to participate and benefit from the program.

Way Forward

- **Increase regular interaction**, follow-up, and communication, ensuring that key discussions remain active and actionable among youth group members.
- **Strengthening the Role of Facilitators (RP)** by enhancing the involvement and movement of ward-level activities. Support the youth clubs to participate more meaningfully at the local-level planning and budgeting processes, which empowers them to contribute to decision-making and the prioritization of youth agendas. Increase youth involvement in advocacy and campaign efforts to work towards tangible community impacts.
- **Providing financial support and technical resources** to youth groups for essential and effective execution of their action plans. Advocate for increased budget allocations to youth-focused initiatives at the local and provincial levels. Align municipal budgets with youth priorities to provide consistent funding for youth-driven initiatives.
- **Establishing formal connections between youth clubs and other community organizations** can foster a more integrated and sustainable support system. Strengthening these linkages helps institutionalize youth involvement within community initiatives, ensuring ongoing engagement and support for youth activities.
- **Registering youth clubs as formal organizations** at the municipal, provincial, and national levels can ensure sustainability and ease of scaling efforts.
- **Develop strategies to minimize dropout rates**, especially for females, by addressing cultural barriers and family responsibilities.
- **Establish standardized policies and guidelines for the registration process** across municipalities to overcome current administrative challenges.