

**Joint Programme for Adolescent and Youth Development:
Participatory Needs Assessment in Hopley**

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Introduction

In order to address key development challenges faced by adolescents and young people throughout Zimbabwe, UNFPA and ILO are partnering to implement a multi-sectoral programme targeting vulnerable adolescents and young people. The Joint Programme for Adolescent and Youth Development (JYAPD) aims to improve education, skills and economic opportunities as well as increase access to and use of sexual and reproductive health services among 10-24 year olds in particularly disadvantaged contexts throughout Zimbabwe. The ultimate goal of JYAPD is to reduce unwanted pregnancies and early marriage among the younger cohorts, and improve young people's empowerment and participation so they grow up to lead healthy, productive lives.

Following selection of JPAYD focus age groups and districts, UNFPA commissioned an integrated quantitative and qualitative baseline needs assessment in one target community. Hopley is a peri-urban district located on the outskirts of Harare, and is characterised by high levels of migration, poor infrastructure, and low education and employment rates. The purpose of the needs assessment was to collect statistical information on key indicators that the JPAYD hopes to impact over the course of the programme (e.g. adolescent fertility rates, HIV prevention, experiences of violence, etc.) as well as to gain a deeper understanding of young people's experiences of marginalisation and vulnerability.

The study was thus composed of both a cross-sectional survey to set a representative benchmark for change over time, and a rapid participatory appraisal to capture young people's own perceptions of the barriers and challenges they confront prior to introduction of JPAYD activities.

Study Design and Methods

The baseline research was designed as a rapid assessment, which is an efficient and targeted mixed-methods approach used to identify relevant indicators that can be monitored over time to track a programme's progress. In Hopley, quantitative and qualitative data collection were conducted in parallel in early to mid March 2017. This report thus presents the methods and findings from both components of the study.

Participatory Appraisal

Participatory research involves local community members in generating and analysing information about their priority concerns. Although focused on a specific topic (in this case, the vulnerability of local young people, and the opportunities and challenges they face in Hopley), participatory research avoids being "extractive" during data collection. Rather than ask questions based on the researchers' perceptions of which issues are most important, participatory methods use structured interactive activities to stimulate discussion among local residents, encouraging them to define their own problems, share their views on the causes and consequences of these problems, and consider existing or potential solutions.

In particular, a *participatory rapid appraisal* involves intensive fieldwork over a short period of time with community members grouped to reflect diversity in the study area. By comparing ideas from different types of people in different locations, a picture of the research topic emerges that reflects the perspectives of those directly affected. Furthermore, the participatory research process itself engages community members in proactively analysing their situation and thus can build ownership and commitment to addressing local challenges.

Participatory methods usually rely on use of visual tools, such as maps and diagrams, which can be easily understood by participants with different literacy levels, and also actively promote participation by the whole group. The same activities can be conducted at regular intervals during programme implementation to determine how local community members perceive the new services or resources, and whether they consider the expected benefits to have resulted.

Prior to the start of fieldwork, 20 data collectors were recruited from Zichire and City of Harare Health Services, which are both organisations that will deliver JPAYD services. The research team was drawn from community health managers and district health officers with familiarity with the Hopley area and awareness of JPAYD aims and planned activities. Training was provided over 5 days and included familiarisation with the qualitative study protocol, an introduction to the principles and methods of participatory research, overview of ethical considerations, practice of each data collection tool, and two half-days of piloting in a community similar (but not geographically near) to Hopley.

Fieldwork in Hopley took place over 4 days (March 13-16). The research team visited Hopley each morning, meeting with participants on the grounds of the local clinic, where local community organisers would gather 8-12 target participants. Team members were organised into 4 groups: one composed of male researchers, two composed of female researchers, and one mixed gender group. Following their assigned data collection session, researchers returned to Harare to debrief and write up expanded notes while the experience was still fresh in their memories. Daily fieldwork notes were then synthesised and emailed to the research consultant for feedback and analysis.

In total, 16 fieldwork sessions were conducted, covering 120 young people and 51 adults. The focus was on engaging young people, particularly those in the 15-19 age group, who are most likely to benefit from skills-building and economic strengthening within the JPAYD, and are also most at risk for teenage pregnancy and early marriage.

In total, the participatory appraisal gathered information from 22 adolescents aged 10-14, 73 adolescents aged 15-19, and 25 young adults aged 20-24. The gender distribution was 59 girls/young women and 61 boys/young men. Among all 120 young people, 68 were not attending school.

Adults were convened into discussion groups to provide more general information about community attitudes toward young people's vulnerability and needs. Adult stakeholders were identified as parents of young people (25 in total, 19 female and 6 male), local business owners/traders (15 in total, 14 female and 1 male), and service providers such as nurses, police officers, church leaders etc. (11 in total, 6 female and 5 male). Among the adults, three quarters of participants were female as it proved difficult to recruit males for mid-morning sessions, due to their competing time demands.

Appendix A provides the study protocol, sampling strategy, and tools used in the participatory rapid appraisal in Hopley. In short, 3 participatory tools were used to stimulate discussion among young people. First, a basic mapping exercise was used as an “ice breaker” to build rapport with participants and learn about key features of their local environment. Figures 1 and 2 below provide examples of how maps were used to identify areas considered meaningful in young people’s lives.

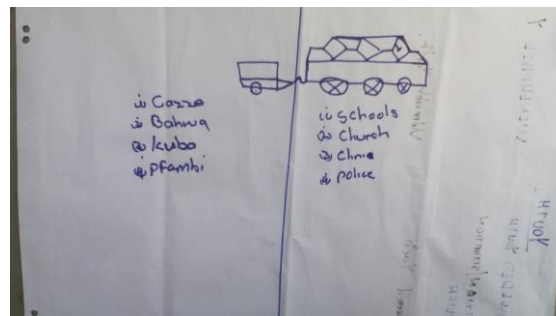
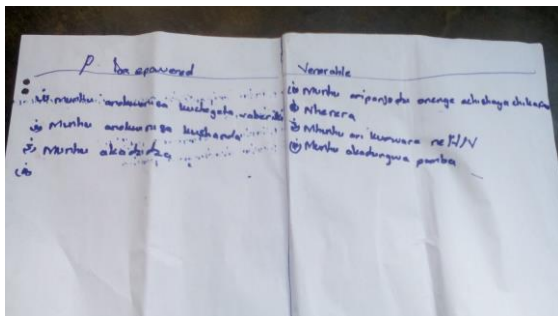


Fig 1: Map of Hopley by a mixed group of 15-24 year olds



Fig 2: Map of Hopley by 15-19 year old girls

Following mapping, groups engaged in “free listing” of the characteristics of “vulnerable” and “empowered” young people, highlighting the differences between them (Figure 3). The groups then referred back to their maps to describe where vulnerable or empowered young people spend time/ can be found, and why. Finally, respondents conducted a visual diagramming activity in which they depicted opportunities that “pull” them forward toward a better life, and the obstacles or barriers that “push” or “hold” them back (Figure 4).



Figs 3 & 4: Vulnerability & empowerment list and Push & Pull factors by 15-19 boys

Finally, a short individual “survey” tool was administered to ask participants to respond to 5 statements using a 5-point Likert scale, with responses ranging from “Strongly Agree” to “Strongly Disagree.” For data collection among adult stakeholders, a focus group discussion topic guide was used to cover thematic areas of interest.

Cross Sectional Survey

The quantitative survey took place in March, reaching a total sample of 665 respondents between the ages of 10-34. Data were collected on socio-demographic variables (age, sex, marital status) with subsequent models covering topic areas of interest to this assessment, namely: school attendance, educational attainment, level of skills, employment and informal economic activity, fertility, experience of violence, and both health risk and health-seeking behaviours. A full set of tables for each variable was generated for use in this report.

Throughout this document, data on the 10-24 age group are presented where age-disaggregated results were available in the provided tables, given that the JPAYD will target adolescents and young people. The total sample size is thus 373 adolescents and young people, comprised of 210 girls/young women (56.3%) and 163 boys/young men (43.7%). The age distribution was 100 10-14 year olds (26.8%), 116 15-19 year olds (31.1%) and 157 20-24 year olds (42.1%).

As the full set of cross-tabulated survey results are available separately, this report has extracted findings directly relevant to the JPAYD assessment questions that will help adapt planned intervention activities. Where the quantitative and qualitative data complement each other and instances where they are in contradiction, have been highlighted.

Qualitative Findings

Daily field notes were reviewed and analysed based on recurring themes, similarities and differences between groups, and relevance to JPAYD aims and objectives. Results from the participatory appraisal with young people and additional discussions with adult stakeholders are organised by the specific questions that guided the research design.

The following questions are drawn from the study protocol and the original Terms of Reference for the qualitative research:

1. To what extent do young people's own priorities match those of the JPAYD? (i.e. experience of sexual and gender-based violence, opportunities for work/ Skills required, comprehensive sexuality education, parent to child communication, access to health services)
2. What are other priorities for adolescents and young people?
3. What are the current facilitators and barriers to young people's engagement in health, education, and social and economic development?
4. How do young people view economic opportunities and how might they best access these?
5. How do young people view existing programmes or interventions targeting them, including their modes of delivery?
6. What are the current gaps in programming?
7. How do perspectives differ between young people, e.g. girls and boys, those in and out of school, older and younger groups?
8. What are the community attitudes towards youth engagement?

To what extent do young people's own priorities match those of the JPAYD? And What are other priorities for adolescents and young people?

The research identified a prevailing sense of hopelessness among local community members of all ages, who emphasised the lack of decent infrastructure, education, and

economic opportunities. In this regard, perceptions of local needs closely match the JPAYD framework, with a focus on low levels of education and employment, and high rates of violence, drug and alcohol use, participation in sex work, and early childbearing.

The lack of suitable schools was particularly highlighted. Every one of the 12 participatory sessions conducted with young people, regardless of participants' age, sex, or educational status, raised the lack of access to schools. According to residents, the problem goes beyond individuals' inability to afford school fees. Schools are poorly built or dilapidated, and have under-qualified teachers. Furthermore, even among young people who can afford school fees, frequent electricity cuts interfere with their ability to study or complete homework, and household poverty means that many children go to school hungry and cannot concentrate. One group of girls illustrated this: "*Shortage of food, [we] go to school without eating and ... faint. Have to survive on one meal a day*" (Girls, 15-19, in school).

Poor education is followed in importance by a lack of adequate jobs in the area. As a result, theft, sex work or selling drugs in the local "Gaza" shops or near to bars and clubs become increasingly attractive options. Peer pressure among young people was frequently mentioned as a reason for participating in such activities, although it was also noted that beer halls and bar areas provide some forms of entertainment given the dearth of leisure activities.

Young people themselves recognise the relationship between their livelihood choices and poor sexual and reproductive health outcomes, including unwanted pregnancies, HIV and other sexually transmitted infections, and violence. The prevalence of these adverse health outcomes led both young men and women to state that adolescent girls and young women tend to be more vulnerable than boys.

Young people also raised more general concerns related to the pervasive poverty in Hopley. They highlighted that they were unable to afford basic commodities, and food insecurity was a very real problem among many households. Family dissolution also led to young people being effectively orphaned, and being a lodger or otherwise living alone or outside of the parental household was one of the main characteristics of "vulnerability".

Key adult stakeholders also highlighted many of the JPAYD focal areas, for example the high rate of drop out from school (especially from grade 7), the high rate of teenage pregnancy and early marriage as young women seek to escape household poverty, and the poor social environment marked by few opportunities and many harmful behaviours.

The group of local service providers pointed out that even when young people had access to skills development or training, these programmes did not benefit them due to lack of subsequent job openings: "*projects are not paying off in their area since people around do not have disposable income [to hire trained young people, e.g. hairdressers]*".

Parents raised similar concerns, "*There are no resources to support young people in Hopley*" and "*both male and female children are not going to school and they end up abusing drugs and engaging in sex work*".

What are the current facilitators and barriers to young people's engagement in health, education, social and economic development?

Resources and community assets that facilitate benefits for young people are as follows: the local clinic, the schools (despite their shortcomings), the marketplace, and churches

that provide a positive steer for those young people who attend them. The open ground used for football matches, “road shows” and other public entertainment events was also seen as an asset with positive benefits for young people, “... *some community gatherings such as trainings also happen at the football ground. ... Grounds [are also for] talent and arts development. Majority of the young people are found at the grounds during the weekends*” (Mixed group, 15-24).

Out of the 12 sessions for young people, 3 listed the police as local “facilitators”. In one case (Girls, 15-19, out of school), this was because they felt the police would intervene in family disputes and episodes of violence. Another group (boys 10-14) mentioned that the police could catch criminals, such as a local youth who stole \$100 and 4 laptops, and that the police “*protect the community from lawlessness*”. Finally, 15-19 year old boys had mixed feelings about the police, stating that they take the “*role of maintaining law and order, but the service is poor because of corruption*”.

The police were more frequently mentioned, however, as challenges/obstacles in Hopley. Young people are afraid of being falsely accused of crimes, hassled, and believe the police take bribes to influence the outcome of investigations. Some mentioned that girls who are engaged in sex work provide sexual services to the police in order to avoid arrest. One group of 20-24 year old young women felt the police had “labelled” Hopley negatively and thus “*police have poor public relations and they feel that the police are not helping them in any way*”. Another group said “*Police officers do not want to help because they say Hopley residents are criminals and they steal from each other.*” (Girls, 15-19, in school).

The most common barriers to young people’s development were poverty, inability to access schools, lack of jobs, and “risky” leisure activities that distract them from academic or other serious pursuits, or in extreme cases lead to addiction and dropping out from school. For example, spending time at “Antony Shops” or the Total service station provides entertainment in the form of bars, pool halls, dance clubs and traditional dance troupes (referred to as “Zvigure” and “masquerade”). For some young people, these became sites where alcohol and drug misuse are problematic, or where girls initiate sex work. The traditional dance groups are linked to dropping out from school, e.g. “*Once kids join these, they drop out of school and abuse drugs and become unruly*” (Girls, 15-19). Girls involved in dances are considered likely to enter sex work.

Other barriers include clinic fees (\$5 per visit, which some 15-19 year old girls said was prohibitively expensive by), and inadequate access to water (boreholes) or electricity. Not having a birth certificate also limits young people’s opportunities. Orphan-hood, living with step-parents, and not being able to live with family members (being lodgers or homeless) were all considered determinants of young people’s vulnerability. The youngest group of boys (10-14) mentioned the busy and dangerous local road, stating that accidents are common.

Parents also raised concerns about poor housing and over-crowded living conditions, explaining, “*More than 8 people stay in one room. This exposes the young people to adult behavior as they sleep with adults. Sometimes they take turns to sleep in the house. Those who are outside end up sleeping with their friends doing as they wish.*”

How do young people view economic opportunities and how might they best access these?

Participants consider formal employment to be the best economic opportunity, but this is an option for only a small minority of young people. Examples of available employment included seasonal work in local chicken farms and on the tobacco auction floor (March-September). A mixed group of 15-24 year old youth noted that *“only a few people are employed and some youths are unemployable because they do not have birth certificates and ideas.”* In this context, “ideas” appears to refer to knowledge of these employment opportunities and initiative to proactively see it. This group also reported that jobs on the auction floor tended to be given to friends/relatives of workers there or exchanged for bribes.

Less formal, occasional work is more common and this includes domestic work for girls and serving as a public transport tout or loading minibuses for boys. Both boys and girls can get work cleaning tuckshops, cutting grass or washing cars. Small businesses/vending are the most common, but do not bring in much money, *“these activities are very common in every area of Hopley. Considering the high number of vending youngsters its not easy to get customers to buy for you and get enough money”* (Boys, 15-19). Vending includes selling prepared food and drinks such as samosas, boiled eggs, donuts, “freezits” etc. Workers at the chicken farm and auction floor are potential customers for these snacks. These jobs had the potential to interfere with schooling, as *“extra money making activities affect studies because [young people] have to divide and balance the time”* (Girls, 15-19, in school).

One group of 15-19 year old girls also mentioned a “mukando” or “savings round” where girls take turns receiving a set amount from the rest of the girls in the group. This system, however, relies on girls’ access to enough cash to make the weekly contribution. The amounts range from \$2 per day, \$5 per week or \$10 per month, depending on group arrangements.

Girls have the further economic opportunity of sex work (formal, or more informal transactional sex). Both young people and adults in the study perceived sex work to be highly prevalent in Hopley, citing areas such as the Antony shops and beer halls. As a group of 10-14 year old girls observed, *“It is difficult to differentiate who is and who isn’t a sex worker because everyone seems to be involved in sex work because most people are not going to school.”* The frequency of sex work reflects the lack of other opportunities, *“Girls indulge in sex work at Antony shops because they do not get money from their parents, no jobs and no businesses”* (Girls 15-19).

While sex work is associated with social and health problems including unwanted pregnancy, contracting HIV, and vulnerability to violence, it was also seen as a means for young women to become empowered, as it gave them access to and control over financial resources. For example, *“Sex workers are empowered because they can look after themselves”* (Girls, 10-14 year old). On the other hand, some participants suggested that girls can exchange sex for as little as 50 cents, and ended up living “hand to mouth” and were unable to save their money.

Furthermore, all young women in areas known for sex work were assumed to be sex workers and would get hassled, restricting access to other forms of entertainment that could be found in some of these areas, *“...every girl who passes through is labelled a prostitute. You can even be asked how much are you charging for sex”* (Girls, 15-19, out of school). Similarly, *“if a girl passes through the place men can fondle their breasts and start whistling at them”* (Girls, 15-19, in school).

Boys also had access to some illegal forms of income, including from selling stolen goods (clothes, solar panels, water tanks, gas stoves) or selling drugs at “Gazas”. Girls also sell drugs, but tend to do so less frequently. Some boys also had more positive experiences of Antony Shops and beer halls, where they “... get to drink and have fun with sex workers and play snooker” (Young men, 20-24).

How do young people view existing programmes or interventions targeting them? AND What are the current gaps in programming?

The table below lists all the formal and informal programmes in which young people participate that were mentioned during data collection, with a brief summary of what community members know and think about each, and how many times each was mentioned.

Programme/Organisation	What do they do?	Who mentioned this?
Girls' clubs	Address girls' empowerment in general, provide networking opportunities and address gender based violence	Girls 10-14 Mixed group 15-24 Parents
Silveira House	Training outreach for young people; do not visit Hopley very often	Mixed group 15-24 Parents Business owners
CESVI	Sexual & reproductive health education for young people	Girls 15-19, out of school Girls 15-19, in school Pr Oviders
Katswe Sisterhood	Health programme for sex workers	Girls 15-19, out of school Service providers
ZIMASSET	Government programme for using national resources to help empower youth.	Young men 20-24
Chiedza	Support for young people living with HIV	Service providers
Zichire	Community health	Service providers
Mashambanzou	School support	Parents
Women's Bureau	Vocational Training	Business owners

The activities were seen to favour girls, given the emphasis on reproductive and sexual health. There was also a clear gender divide in the types of skills offered, with carpentry and construction provided for boys and decorating and food preparation targeted at girls. Nonetheless, participants requested more such trainings, with girls' asking for sewing, decorating, and beautician training and boys' highlighting the need for carpentry/construction. Computer skills were mentioned by just one group of 15-19 girls.

The need for additional programmes was further emphasised by the adult stakeholders, who felt existing programmes were too few and not fairly allocated, for example “Existing programmes are not beneficial to most young people because very few children benefit, they need small specific numbers eg Silveira House program. Yes, they reach them but only a few people benefit because of nepotism and small specific targeted numbers” (Parents).

Business owners reiterated this, “the courses are not offered to all the youths because the organizations do not have the financial capacity to cover the entire community. Additionally

the community leaders who select the youths who benefit from the programmes are corrupt and they select mainly their relatives to benefit in the programmes” (Business owners).

How do perspectives differ between young people, e.g. girls and boys, those in and out of school, older and younger groups?

There were few differences in the issues raised across groups. Younger children (10-14) focused on dangerous “hot spots” in Hopley such as maize fields and unsafe boreholes or wells, where children had been attacked and/or drowned in the past. The youngest group of respondents were also the only ones who mentioned witchcraft and curses as threats to their wellbeing.

Girls and boys portrayed life in Hopley very similarly, and the 15-19 and 20-24 age groups raised similar concerns around poor education and lack of access to cash or other financial resources. The ways in which girls and boys accessed money differed, however, with girls reporting hairdressing/braiding and sex work as most common livelihood options and boys leaning toward construction, working as touts on public transport, loading or carrying goods. Other forms of vending appeared similar for both genders, e.g. preparing and selling food items in the market or near the tuck shops.

Boys and girls both felt that girls were more vulnerable, due to their involvement in sex work and risk of unwanted/unplanned pregnancy and sexual assault. One group of boys pointed out “*girls are more vulnerable when they carry out abortions because these lead to deaths*” (Boys, 15-19). At the same time, however, it was reported that girls are more likely to attend churches, which are seen to be “protective” environments. As stated in a mixed group of 15-24 year olds, “*Young people frequent Pentecostal churches. [It is] girls who mostly go to church.*” Figure 5 shows a community map drawn by a group of out-of-school girls that emphasises the important of local churches (in red).

On the other hand, girls have the opportunity to make money through their relationships, “*boys are vulnerable to the economic situation in the country since they can’t get married to well-off men like girls*” (Boys, 15-19).



Fig 5: Hopley map by Girls 15-19 who do not attend school

The research purposively selected both in-school and out-of-school young people, hypothesising that they might have different insights into opportunities and barriers in Hopley, as well as different experiences of vulnerability. In reality, however, there were no noticeable differences in issues raised by those attending or not attending schools.

One group of parents suggested that age played a role in vulnerability, with older young people more likely to be exposed to harmful influences, *“Vulnerability varies with age. The 10 -15 are less vulnerable compared to the 16 and above. The younger ones are not yet mature enough to decide to behave badly. The other age group consent for themselves hence take drastic decisions that expose them to all social ills. The boys can steal and sell valuables such as solar panels for as little as a dollar. And girls go for sex work and drugs”* (Parents).

What are the community attitudes towards youth engagement?

The four consultation meetings held with adult stakeholders provide insight into broader community attitudes toward young people’s current situation and desired outcomes in future. All four groups responded positively to the proposed JPAYD. For example, parents listed income generation, health services, and leisure activities as priority needs for young people.

In particular, business owners in the community felt they were not in a position to offer support to young people, and so assistance from the outside would be most welcome. They suggested that small-scale income generating projects could be linked to school retention:

“Children should go to school. The schools should offer children the opportunity to work for their school fees. For example, the children could weed the school garden start a poultry project to raise their fees.” On the other hand, there were some concerns about young people’s sustained motivation to participate in organised activities, *“carpentry and building projects have been availed to the young people but most of them abandon them due to lack of focus”* (Service providers).

Finally, some of the stakeholders made some suggestions , such as closing down Antony Shops or other areas where alcohol and drug consumption and transactional sex occur. They felt this would offer the best chance of reducing risks faced by young people: *“City of Harare should close the numerous unregistered beer halls in Hopley”* (Business owners) and *“police should conduct raids at shops like Antony so as to arrest drug and alcohol abusers because they are a menace to society”* (Parents). At program inception, it is recommended to conduct community dialogues to discuss this in more detail and coming up with practical recommendations.

Survey Results: Quantitative Snapshot of Vulnerability in Hopley

The quantitative data confirm many of the issues raised by young people and key informants during the participatory assessment, painting a picture of significant disadvantage for young people in the area. While this is not surprising, given that Hopley was selected as a target site for the JPAYD based on existing indicators of its low socio-economic development, the cross-sectional survey demonstrates significant challenges faced by local adolescents and young men and women, providing both opportunities but potential barriers to JPAYD implementation.

Education, Skills and Employment

As raised numerous times during participatory workshops, low educational attainment is widespread in Hopley. There is a sharp decrease in school enrolment following primary

school. Among 10-14 year old respondents, 85.1% of boys and 92.6% of girls were currently attending school. By age 15-19, however, this had dropped to 55.1% of boys and just 29.3% of girls. Among the 20-24 group, 25.9% of males and 3.0% of females reported attending school. Among all 665 survey respondents, 73.4% had “left school.”

These education data are slightly difficult to interpret, however, as the survey question did not differentiate between leaving school at completion of secondary level and dropping out prematurely. It is clear that *all* 11% of 10-14 year olds who are currently not in school are not completing full education. However, among 15-19 year olds, 70.7% of girls and 44.8% of boys reported having left school, many of whom will have dropped out early. Similarly, while 20-24 year olds might be expected to have finished their schooling, it is likely that a significant proportion did not. This study cannot quantify actual educational attainment.

Opportunities for out-of-school young people appear minimal, again reflecting concerns raised throughout the participatory assessment. Gaining skills outside of school appears difficult. The survey asked respondents to indicate their formal skills. Only 10 children aged 10-14 answered these questions. Among 15-19 year olds, 40.5% indicated having gained some skills, and the corresponding figure was 55.4% of 20-24 year olds. The table below summarises the specific skill areas reported within these two age groups, highlighting the significant gender differences between sectors in which young people receive some training.

Reported Skills	Male 15-19 (%)	Female 15-19 (%)	Male 20-24 (%)	Female 20-24 (%)
Welding	4.0	0.0	2.4	0.0
Motor mechanics	8.0	0.0	17.1	0.0
Carpentry & joinery	4.0	0.0	9.8	0.0
Hairdressing	0.0	27.3	2.4	45.7
Arts & crafts	0.0	4.6	2.4	0.0
Home decor	0.0	4.6	0.0	4.4
Dressmaking	8.0	50.0	4.9	21.7
Crop Production	16.0	0.0	0.0	8.7
Poultry	0.0	9.1	2.4	8.7
Catering	4.0	4.6	0.0	6.5
Electrical	12.0	0.0	17.1	0.0
ICT	4.0	0.0	2.4	0.0
Other	40.0	0.0	36.6	4.4
Plumbing	--	--	2.4	0.0

While the proportion of males and females reporting some skills did not vary much, the type of skills they reported did. In both age groups, the top 3 skills reported by females were *dressmaking*, *hairdressing*, and *poultry*. These accounted for 86.3% of the skills among 15-19 year old girls and 76.1% of those of young women 20-14. Among this latter group, the number of women skilled in crop production was equal to that of poultry.

Among males, however, the top 3 skills were *other*, *crop production* and *electrical* among 15-19 year old boys and *other*, *motor mechanics* and *electrical* among 20-24 year old young men. *Other* was not specified. There was very little overlap between males and females in terms of the skills they had developed.

Roughly half of both males and females reporting having acquired their skills from parents or were self-taught rather than having received any formal training. This complements the participatory assessment, in which local community members emphasised the lack of training opportunities. Among *all* skilled respondents in the survey (including 25-34 year

olds), 52.3% of males and 50.3% of females learned their primary skill by themselves or from parents, followed by informal apprenticeship for males (17.0%) and secondary school for females (21.7%). Just 6.5% of males and 8.9% of females had received any vocational training.

In terms of economic activity over the past 12 months, the following table shows distribution by sex and occupation for all 665 respondents in the survey.

Employment Status	Male #	Female #	Total #	%
Permanent paid employee	13	2	15	2.3
Casual paid employee	76	55	131	19.7
Employer	1	3	4	0.0
Own account worker	44	37	81	12.2
Vendor	22	76	98	14.7
Sex worker	0	6	6	0.1
Unpaid family worker	2	23	25	0.4
Looking for work/unemployed	31	49	80	12.0
Student	79	73	152	22.9
Homemaker	10	63	74	11.1

Nearly half of the entire sample were either students or casual paid employees. Informal labour such as vending or own account work were next most common, with a full 12.0% of respondents actively looking for work. Females were more likely to be unemployed and less likely to be engaged in any form of labour except vending, unpaid family work and homemaking. Some respondents, however, may have selected “looking for work/unemployed” even if they participated in occasional informal economic activities.

A separate section asked respondents if they had ever worked for a family business or on a household agricultural plot. While a similar small proportion of both males and females contributed to a family business (14.4% and 12.4%), agricultural labour is more gender segregated, with double the proportion of females (33.6%) reporting working on household plots compared to males (15.8). Similarly, while 17.6% of females had ever worked as a domestic worker, just 7.9% of males had done so.

To explore young people’s recent involvement in work and income generating activities, respondents were asked to indicate what work they had done in the *past week*. In this set of questions 28.1% of males and 23.8% of females reported doing “any kind of business, big or small, for yourself.” The amount earned through independent business was not asked. Unpaid work in a family business was 14.4% among males and 12.4% among females. While these proportions are roughly similar between males and females, girls and young women were much more likely to have done any work on a “household plot, food plot or kraal” (33.6%), and to have done domestic work for another household for payment in cash or kind (17.6%). The corresponding rates for boys and young men were respectively 15.8% and 8.1%. Again, remuneration amounts are not available.

Married or cohabiting young people were more likely to be engaged in business for themselves (32.7%) compared to those who were unmarried (15.2%), but less likely to be contributing unpaid labour to a family business (10.8% vs. 19.3%). Relationship status did not make a difference to proportion working on a household or food plot/kraal (roughly 25%) for both never married and currently married/cohabiting. Unsurprisingly, school enrolment affected the time devoted to work activities. Among those enrolled in school, 16.3% spent time in the past week working for an independent business, 24.3% working on a plot, and 8.5% providing domestic labour. Among those who had left school, these

proportions were higher, at 28.9% involved in independent business, 26.8% working on a plot and 15.4% providing domestic labour. In the case of unpaid work in a family business, this was reversed, with nearly double the rate of school-going young people reporting this activity in the past week (20.3%) compared to those who had left school (10.7%).

Six women reported engaging in sex work, and only 3 of these were under the age of 25. Among the 10-24 age group, just 5 respondents agreed with the statement that they had ever become “sexually involved because of gifts, cash or anything else.” During the participatory assessment, many Hopley residents implied that sex work, or exchanging sex for material benefit, was extremely common among adolescent girls and young women, and so this is one topic area where the quantitative and qualitative data do not complement each other. However, as the questionnaire asked individuals directly about their own personal experience of sex work, it is likely that this was under-reported due to associated stigma.

Marriage and Fertility

None of the youngest group (10-14) reported ever having been married or co-habiting with a partner. Among this group, none of the girls had begun childbearing. In the 15-19 age group, 20.7 % of girls had at least one child. None of the boys 15-19 reported being married or cohabiting, but 29.3% of 15-19 year old girls reported being married, and 2 girls (3.4%) were living with a partner. A further 2 girls (3.4%) were separated from their husbands.

By age 20-24, both childbearing and experience of marriage were found at higher rates. A large majority of respondents reported at least 1 live birth (80.8%). Most young women were married (68.7%), while 11.1% were separated. Cohabitation remained rare at 3 % and 1 woman was widowed (1%). Among young men, the respective figures were 37.9% married, 1.7% separated, 1.7% living with a partner and none were widowed.

Age at marriage ranged from 15-24, with a higher median age among young men (24) than women (19).

Risk Behaviour

In the 10-24 age group, 177 respondents reported ever having sex, comprising 47.4% of the entire age group, 37.4% of males and 55.2% of females. Only 2 boys among 10-14 year olds reported sexual experience, compared to 31.0% of 15-19 year olds and 88.5% of 20-24 year olds. Among these, the median number of partners in the last 12 months was 6.4 for males and 11.2 for females, with a reported range of 1-99 (males) and 1-50 (females).

Overall, condom use was higher among males than females. The table below presents proportion of condom use at last sex and consistent condom use for 15-19 and 20-24 age groups, by sex (including just those respondents who reported having ever had sex). Although it appears that condom use is higher among 15-19 year olds, these results are based on very small numbers (10 boys and 26 girls).

	Male 15-19 %	Female 15-19 %	Male 20-24 %	Female 20-24 %
Condom use at last sex	70.0	26.9	53.1	15.6
“Always” use condom	60.0	19.2	36.7	18.9

Alcohol and drug use were not specifically asked about in the survey, although there were several questions about the respondent's alcohol use *at the time of sexual activity*. Rates of alcohol consumption were not particularly high; 11.1% of 15-19 year olds and 8.6% of 20-24 year olds reported drinking alcohol at last sex. It is hard to interpret these low rates of reported alcohol use given the prevalence of drinking and drug taking described throughout qualitative data collection workshops. It may be that because the survey only asked about alcohol consumption in the context of sexual activity, which itself was reported by fewer than half of adolescents and young people, more regular alcohol use was missed.

Exposure to Violence

The qualitative findings highlighted violence as a significant social problem throughout Hopley, and this was clearly confirmed by survey results. Experience of lifetime violence as well as episodes in the last 12 months were both fairly common. There was a notable gender discrepancy in experience of sexual violence, with adolescent girls and young women reporting higher prevalence except among the 10-14 year olds, where numbers were very low and thus unreliable (just 2 boys and 1 girl reported experience of sexual violence).

	% 10-14 Males	% 10-14 Females	% 15-19 Males	% 15-19 Females	% 20-24 Males	% 20-24 Females
Physical violence (since age 10)	34.0	30.2	27.6	36.2	36.2	34.3
Physical violence (last 12 months)	34.0	24.5	15.5	13.8	19.0	17.2
Sexual violence (since age 10)	4.3	1.9	0.0	19.0	1.7	14.1
Sexual violence (last 12 months)	4.3	0.0	0.0	5.2	0.0	4.0

The 20-24 year olds reported the highest rate of violence from an intimate partner, and this was reported almost exclusively by women. Among males in this age group, 3.5% reported suffering physical violence at the hands of a partner, and the corresponding figure was 28.3% of women 20-24. In the past 12 months, these rates were again 3.5% among males and 22.2% among females.

Witnessing violence within the home was also commonly reported. Among 10-14 year olds, 34.0% stated that their father beat their mother, and this was similar among 15-19 year olds (29.3%) and 20-24 year olds (29.3%). Looking across the whole survey sample, males reported experiencing physical violence most commonly from a stranger (39.8%), friend or acquaintance (20.4%), or father/stepfather (10.2%). Among females, the most common perpetrators of physical violence were current or past husband/boyfriend (42.2%), stranger (12.3%) or father/stepfather (8.4%). The numbers become too small for meaningful sub-analysis by age group.

HIV Knowledge and Health Seeking Behaviour

Composite indicators were compiled for comprehensive knowledge of HIV *prevention*. Knowledge of HIV was fairly low across all groups, although males consistently had higher rates. The better knowledge of HIV prevention exhibited among the 15-19 age group could reflect their more recent exposure to health messages in school or recent programmes targeting their age cohort.

Among all 10-24 year olds, 34.3% had ever tested for HIV and received their results. This increased with age, from 5.0% of 10-14 year olds, 31.0% of 15-19 year olds to 55.4% of

20-24 year olds. With the exception of among 10-14 year olds, females tested at higher rates than males, presumably due to their greater exposure to SRH services.

	% 10-14 Males	% 10-14 Females	% 15-19 Males	% 15-19 Females	% 20-24 Males	% 20-24 Females
Comprehensive knowledge of HIV prevention	36.2	17.0	72.4	44.8	55.2	46.5
Ever tested for HIV and know result	6.9	3.8	29.3	32.7	41.4	63.6

The following tables summarise clinic visits among *unmarried* 10-24 year olds by age and sex for different visit purposes. The sample size for these questions was 260 respondents. The table shows that overall service use is low. As expected, service use increases with age, and females are more likely to access sexual and reproductive health care except for condoms and HIV testing where rates are roughly the same between males and females.

Purpose of Visit	10-14 (%)	15-19 (%)	20-24 (%)	Male (%)	Female (%)
Family Planning	0.0	3.1	15.9	1.4	9.2
HIV Testing	5.0	24.7	54.0	25.7	22.5
STI Treatment	1.0	4.2	14.3	2.9	8.3
Condoms	0.0	7.2	22.2	7.8	8.3
Pregnancy Services	1.0	4.12	12.7	0.0	10.8

Despite low health-seeking behaviour, adolescents and young people expressed high levels of comfort with the idea of attending clinics. 85% of both males and females reported that they would be comfortable attending the clinic for any SRH service, and this increased by age from 76.0% of 10-14 year olds, through 89.7% of 15-19 year olds to 93.7% of 20-24 year olds.

These high percentages potentially reflect desirability bias, where respondents somehow felt expected to provide positive feedback on available services. On the other hand, given fairly low levels of SRH knowledge, the discrepancy between *perceived comfort* of services and their *uptake* could be due to adolescents and young adults being unaware of their potential risks.

One of the possible intervention areas within JPAYD is working with adolescents, young people and their parents to enhance communication about risk and health, including related to sexual behaviour. The survey found mixed attitudes to discussing these topics with adults and peers alike. For example, 49.0% of 10-14 year olds, 58.7% of 15-19 year olds and 66.7% of 20-24 year olds reported that they felt “free to discuss sexuality issues with parents/guardians.” However, roughly half of each age group felt that talking to parents or guardians about sex would make their parents think that the young people were interested (or engaged) in sex. When asked if they had actually engaged in conversations about sexuality with parents/guardians in the past month, just 24.0% of 10-14 year olds, 20.0% of 15-19 year olds and 40.0% of 20-24 year olds said they had done so.

Discussing sexuality with other young people appeared easier. Among all 10-14 year olds, 54.0% said they “felt comfortable” discussing sexuality issues with other peers, and this increased to 84.5% of 15-19 year olds and 87.3% of 20-24 year olds.

Study Limitations

While the JPAYD needs assessment in Hopley is strengthened by its integrated quantitative and qualitative, mixed methods approach, it nonetheless has certain limitations. First, the study was commissioned by the agencies responsible for the design and implementation of the JPAYD, and this is likely to have been known by survey and participatory appraisal respondents. Some early activities of JPAYD have already been initiated in the community, so some community members will be familiar with its aims. This could have led to some form of desirability bias (where respondents answer questions according to what they think the researchers want to hear), or focused responses around their expectations/ preferences for the programme.

In the case of the community based survey, sampling was designed to maximise its representativeness among Hopley residents. However, out-migration or unavailability of certain groups during data collection could have favoured participation by some socio-demographic sub-populations over others. For some variables, numbers were quite small, making it difficult to disaggregate further. Also, some questions may have precipitated desirability bias (such as levels of comfort attending local services), while others may have been under-reported due to stigma (sex work).

In the case of the participatory appraisal, while the aim is to collect depth of information rather than breadth, there is significant likelihood of bias introduced by participants being recruited by local community workers. Pre-selection of specific categories (age, educational status, gender) will have helped to mitigate this, but we can see from the larger number of female adults compared to male adults that some unpredicted differences between community members' willingness or ability to participate remain. However, it is likely that young people who attended the data collection sessions are more likely to be those who will have time and interest to participate in JPAYD activities. This means their perceptions and experiences are highly relevant to the planning process, although they may not be the most hard-to-reach young people in Hopley.

Considerations for JPAYD implementation

- The top local priority is low school attendance and poor quality of existing schools, and this is confirmed by the quantitative data. Without basic literacy and the foundation of primary education, young people may struggle to benefit from additional training or skills-building. Ideally JPAYD should assist with school retention/ drop-outs but if this is not possible, links to institutions that provide school fees, uniform and other educational support (e.g. BEAM) could be useful.
- Community members are in agreement about the lack of job opportunities for young people in Hopley. Although there were some examples of small-scale buying and selling, or providing services like hair braiding, people try to find work outside Hopley. Thus, if training and vocational skills are provided, some thought needs to go into how young people will be able to apply these newly acquired qualifications to the job market.
- At the moment, use of vocational training is quite low, with the majority of survey respondents who reported having some skills stating that they acquired these skills from their parents or were self-taught. This could illustrate the lack of any skills-building/vocational offerings but might also mean that local young people are not accustomed for formal training and some effort may be required to recruit and retain them in new programmes.
- To date, there appears to be a significant gender division in skills and vocational training offered to young people. While this is likely to reflect the gender division of the workforce and expectations of both young people and potential employers, some thought could be given to whether the capacity building components of JPAYD could challenge traditional stereotypes related to the job market. Both boys and girls report selling food items, for example, and there could be other areas of overlap both in terms of young people's interests and sources of employment outside Hopley.
- Recent economic activity (past week) shows that a significant minority of both males and females work in independent businesses and contribute to family businesses. Significantly more females, however, work on garden plots or provide domestic labour to other households. This again highlights the way in which economic activities reflect socialised gender roles. However, in the absence of data on earnings, it is impossible to interpret this data to show which gender is more disadvantaged economically. In general, broadening work options for both boys/young men and girls/young women and avoiding "segregated" occupations will likely improve longer term employment prospects.
- Rates of physical and sexual violence, both within and outside the home, remain high across age groups. Violence is also an issue of concern, and perceived by the community to be linked to alcohol and drug misuse (particularly in "hot spot" areas such as the Antony shops). Efforts to address widespread violence, and to engage the community in identifying feasible local solutions, could be a useful JPAYD contribution.
- HIV knowledge is fairly low among young people, although uptake of testing is not insignificant. Health-seeking behaviour in terms of SRH service use at local clinics is very low, particularly among males, despite clinics being identified as a

community “asset” and protective benefit during participatory workshops. This suggests that the JPAYD focus on “youth friendly” health services is well-placed, although some thought will need to go into how best to attract young people and ensure they recognise their levels of sexual (and other) health risks.

- Lack of official documents (e.g. birth certificates) might be an easy problem to address, thus eliminating a basic barrier to young people’s educational and employment opportunities.
- Many local households are unable to meet their basic needs including housing and food. The most vulnerable young people were characterised as homeless, outside the care of their parents/families, struggling to feed themselves. These may be the most difficult to reach with new activities.
- Leisure activities for young people are lacking, and some that are available seem to be associated with risks, e.g. traditional dance troupes/masquerades. These could potentially be targeted as potential sites of *positive* leisure activities, through inclusion in awareness-raising, support for health and social benefits etc.
- Formal sex work and informal transactional sex are thought to be a highly prevalent means of girls’ access to cash, although there were few reports of this in the quantitative data. Similarly, selling drugs at “Gazas” provide economic opportunities to young males. The amount earned through these means may prove difficult to surpass through hair-braiding, food preparation, construction, carpentry etc. especially in the short term. In addition to providing alternatives, recognition of the existing “local economy” and “harm reduction” approaches might help mitigate risks and earn trust of young people.
- Both adults and young people regard churches as beneficial community assets and potentially “protective”. There appears to be a gender difference regarding interest in attending churches for social reasons or during leisure time, with greater participation by girls. Churches provide an opportunity for reaching some young people and their positive influence could be built on through the programme.
- Local residents see both early childbearing and early marriage as highly prevalent social harms. While the focus of JPAYD is on reducing these and increasing alternative opportunities as young people transition to adulthood, efforts could also be made to provide relationship counselling, conflict resolution skills, and parenting classes for those young people who do find themselves in early relationships and/or are young parents.
- There appear to be contradictory perceptions of the role of police in Hopley. It was noticeable throughout data collection that many young people omitted the police station from their maps of Hopley. When asked, they dismissed the police as not relevant to them, or in fact expressed fear of being hassled/arrested. On the other hand, some groups mentioned that the police will intervene in cases of domestic abuse and family conflict, and catch perpetrators of violence and theft. In either case, the police do appear to be powerful stakeholders and thus need to be engaged in some way.
- Adults who participated in the research took a judgmental approach to some of the perceived threats to young people’s well-being, such as the presence of bars where

alcohol misuse, sale and consumption of drugs, and sex work occur. Some recommended that these areas are closed down. To avoid unrealistic expectations of changes that JPAYD may be able to bring about, it may be worth engaging people directly in consultations about how to reduce risks to young people while acknowledging that risky environments are likely to remain in the local community.

- Although programmes for young people do exist and are known by both young people and adults, these are seen as inadequate to meet the largescale needs, and opportunities to participate are seen to be unfairly distributed. Transparent selection for participation in JPAYD activities will help gain community approval and support, and coverage of the population of young people should be maximised to influence the broader environment.