

GROWING UP GREAT! SHOWS PROMISE IN SKILLS DEVELOPMENT AND NORMS SHIFTING AFTER ONE YEAR

BOX | KEY FINDINGS After 1 year of Implementation

Growing Up GREAT! improves the reproductive health knowledge, skills, and gender awareness of girls and boys ages 10 to 14, known as very young adolescents (VYAs). It yields similar improvements in adults, to create a strong developmental environment that enables VYAs to mature in healthier ways.

Certain aspects of the program are particularly effective for out-of-school VYAs, namely:

- Feeling comfortable with puberty and body changes
- Communicating with adult caregivers about reproductive health, including healthy romantic relationships and contraception
- Bullying others less frequently (for boys)
- Expecting more gender-equal sharing of household chores (for girls)

The program also helps parents/caregivers, teachers, and health care providers by:

- Building adult-child communication skills
- Increasing awareness of VYAs as young people with their own thoughts and desires
- Acting with greater gender-equality towards girls and boys

Overview of the Growing Up GREAT! intervention

Growing Up GREAT! is being implemented in Kinshasa, Democratic Republic of Congo, reaching girls and boys ages 10 to 14. The first aim of the intervention is to build knowledge, health- and gender-positive attitudes and skills, and self-efficacy of these very young adolescents (VYAs). The second aim is to engage important adults in the lives of adolescents and the social systems in which VYAs reside to foster an environment that values and supports VYAs in their journey through puberty. To achieve this aim, Growing Up GREAT! builds adults' knowledge, attitudes, and skills relating to puberty, reproductive health, violence reduction, positive adult-adolescent communication, and equitable gender norms and roles. With a better base of knowledge, more open attitudes, and improved skills base, and via their interactions with VYAs, adults in Growing Up GREAT! provide a foundation of support for later family planning and reproductive health (RH) behaviors.

At the heart of Growing Up GREAT! is the goal of shifting unhealthy norms to more beneficial ones. The restrictive norms Growing Up GREAT! seeks to address include:

- Adults should not discuss puberty and reproductive health topics with adolescents.
- VYA girls and boys should not discuss family planning and the use of contraception.
- Girls should be prioritized to do household chores; boys should be prioritized to attend school.
- VYAs who seek health information or care are engaged in 'bad' behavior.

The Growing Up GREAT! multi-level intervention package consists of several components (Figure 1). Girls and boys attend weekly sessions of mixed-sex groups covering topics designed to improve their knowledge, attitudes, practices, and self-efficacy in three main areas: puberty; healthy behaviors and relationships; and equitable gender roles. In-school and out-of-school girls and boys participate in 26 sessions and one visit to a local health center. The sessions are held over a nine to 12-month period in either school-based groups (for in-school girls and boys) or community-based clubs (for out-of-school girls and boys).

FIGURE 1. Growing Up GREAT! Multi-level Intervention Package

LEVEL		ACTIVITIES
	Individual	Group learning sessions (education session) with in-school VYA clubs and out-of-school VYA groups (CBO partners)
	Family	Discussion groups around model intergenerational behaviors (Video-witnessing by parents)
	School	Teacher orientations on using the intervention in classroom during family life education sessions
	Health Care	Exchange visits between providers and VYAs
	Community	Community discussions on adolescent reproductive health and behaviors that create supportive environments

Concurrently, the adults with whom VYAs interact in home, school, and health care environments also participate in Growing Up GREAT! activities. Activities with adults facilitate similar discussion and reflection on puberty, gender expectations, and related adult actions that influence VYA behaviors, and work to improve communication skills on such sensitive issues. Activities are designed to lead to more gender-egalitarian support for young people, such as giving girls and boys equal time to do homework, addressing VYAs’ newfound fertility and health issues, and fostering gender-equitable healthcare-seeking behaviors.

Two study approaches used to assess the impact of Growing Up GREAT!

Researchers conducted two studies to assess the impact of Growing Up GREAT! activities (see Table 1). The **quantitative survey**, part of the Global Early Adolescent Study (GEAS), collected data from girls and boys who participated in Growing Up GREAT! activities (the intervention group), as well as girls and boys who did not (the control group). The first wave, or baseline, of this quantitative survey was conducted in 2017 with 2,842 adolescents before the Growing Up GREAT! intervention started, and the second wave was conducted approximately one year later in 2018 with 2,519 adolescents after one round of Growing Up GREAT! activities. Nearly 90% of the baseline participants were interviewed in Wave 2. In addition, a **participatory qualitative evaluation** was conducted in 2018 to provide deeper insights into changes. This study used interviews and story-collection from VYAs and adults to gather participant perspectives on individual, family, health care, and normative changes in the community due to Growing Up GREAT! Together, these two studies provide insight into the multi-level impacts of Growing Up GREAT!

TABLE I. Study Design and Methods Used to Assess the Effect of Growing Up GREAT!

	QUANTITATIVE SURVEY	PARTICIPATORY QUALITATIVE EVALUATION
Study design	<ul style="list-style-type: none"> Longitudinal, quasi-experimental research design (baseline and approximately 12 months later) Randomly sampled VYAs <ul style="list-style-type: none"> Girls and boys Intervention and control groups 	<ul style="list-style-type: none"> Endline-only/Intervention-only evaluation design Purposively sampled participants in Growing Up GREAT! activities <ul style="list-style-type: none"> VYAs: Girls and boys Adults: Parents/caregivers, teachers, health care providers
Conducted by	Kinshasa School of Public Health; GEAS, Johns Hopkins Bloomberg School of Public Health	VYA club member-evaluators; Kinshasa School of Public Health; Save the Children; Institute for Reproductive Health, Georgetown University
Study respondents	<p>N=2,519 in Wave 2</p> <ul style="list-style-type: none"> Intervention group (n=1,276) <ul style="list-style-type: none"> In-school VYAs Out-of-school VYAs Control group (n=1,243) <ul style="list-style-type: none"> In-school VYAs Out-of-school VYAs 	<p>N=54 around the time of Wave 2</p> <ul style="list-style-type: none"> In-school VYAs Out-of-school VYAs Parents/caregivers of VYAs in Growing Up GREAT! clubs Teachers Health care providers
Key questions	<ol style="list-style-type: none"> How are perceptions of gender and social norms constructed in early adolescence? How do VYAs perceptions of gender and social norms predict health and well-being outcomes? What are the effects of the Growing Up GREAT! intervention on VYAs in selected Growing Up GREAT! outcomes? 	<ol style="list-style-type: none"> What are the most significant changes that participants have experienced since the start of Growing Up GREAT!? How has the participation of VYAs in Growing Up GREAT! influenced their development? How has VYAs communication with peers, family, and teachers on puberty, body literacy, and healthy relationships changed since Growing Up GREAT! began? How have parents/caregivers changed due to their own and their children's participation in Growing Up GREAT!?
Methods	<ul style="list-style-type: none"> Quantitative survey questionnaire Professional Enumerators 	<ul style="list-style-type: none"> Semi-structured interviews 'Most Significant Change' story collection Trained VYA Evaluators

NOTES ON THE STUDIES

Quantitative survey

- At Wave 2, one in five adolescents in the control group reported they attended a Growing Up GREAT! activity. Also, although program monitoring reports indicated frequent, regular VYA attendance in both in school and out-of-school clubs, the survey findings indicated limited exposure of intervention adolescents enrolled in Growing Up GREAT! clubs (estimated to have reached 50-60% of VYAs, with girls more frequent attendees than boys).
- In light of these programmatic realities, the differences demonstrated between the intervention and control group (that is, the programmatic impact) shown in statistical findings may be minimized.

Participatory qualitative evaluation

- VYAs in Growing Up GREAT! clubs defined the study questions, and six VYAs were evaluation team members.



KEY FINDING I: Growing Up GREAT! leads to significant improvements not only in VYAs' knowledge of RH and puberty but also in reductions in bullying and shifts towards gender-equitable norms.

Results shown in Table 2 compare the intervention versus control group after one round of Growing Up GREAT! activities, controlling for demographic variables. The largest and most significant changes in knowledge, attitudes, behaviors and gender-equitable beliefs and norms were seen in out-of-school VYAs involved in Growing Up GREAT!

Pubertal development and body comfort. Among both the control and intervention groups, comfort with pubertal development was relatively high, with roughly 85% of respondents in both groups stating they were proud of the changes they were going through at Wave 2. Body satisfaction was also relatively high, with

TABLE 2. Effect of Growing Up GREAT! On Intervention Groups After One Year, Compared to Control Groups

Key Thematic Goals	X No significant improvement comparing intervention and control groups ($p \geq 0.05$) ✓ Significant improvement comparing intervention and control groups ($p < 0.05$)	IN-SCHOOL	OUT-OF-SCHOOL
		Intervention, n=914 Control, n=901	Intervention, n=362 Control, n=342
Increase in puberty and reproductive health knowledge, attitudes & skills	Pubertal and body comfort	X	✓ (girls only)
	Menstrual periods knowledge	✓	✓ (especially younger adolescents 10-12)
	Pregnancy and HIV knowledge	✓ (especially girls)	✓ (especially girls)
	Communication with parents/caregivers about RH (healthy relationships and contraception)	X	✓ (especially girls and younger adolescents 10-12)
Reduction in bullying and other forms of violence	Experienced teasing and verbal bullying	X	✓
	Perpetrated physical violence such as slapping or kicking	X	✓ (boys only)
Shift toward gender-equitable norms	Expectations of gender-equal sharing of household chores	✓	✓ (especially girls)
	Reduced attitudes/beliefs about: <ul style="list-style-type: none"> • Boys being rewarded for sexuality and girls being penalized (the sexual double standard) • Gender-stereotypical roles (e.g., male breadwinner) • Gender-stereotypical traits (e.g., male toughness) 	X	X
	Lowered tolerance for discrimination against gender-atypical peers	✓	X

Source: 2018 GEAS Study, difference-in-differences analyses

respondents in both groups reporting they were satisfied with their bodies. However, out-of-school girls in the intervention became even more satisfied with their bodies compared to girls in the control group. In addition, for both in-school and out-of-school girls, the intervention had significant effects on their knowledge of where to get information about menstrual periods (In-school: OR=2.10 [1.34, 3.29], Out-of-school: OR=4.18 [1.95, 9.00]).

Pregnancy and HIV transmission prevention through condom use. By Wave 2, all adolescents in the study showed significant improvements in knowledge of pregnancy and HIV prevention through condom use. The most extensive changes were again in out-of-school girls who participated in Growing Up GREAT!, who were almost four times more likely to know where to get condoms (OR=3.83 [1.99-7.38]) than the control group. In-school girls in the intervention were 1.5 times more likely to know where to get condoms (OR=1.55 [1.06-2.27]) compared to the control group.

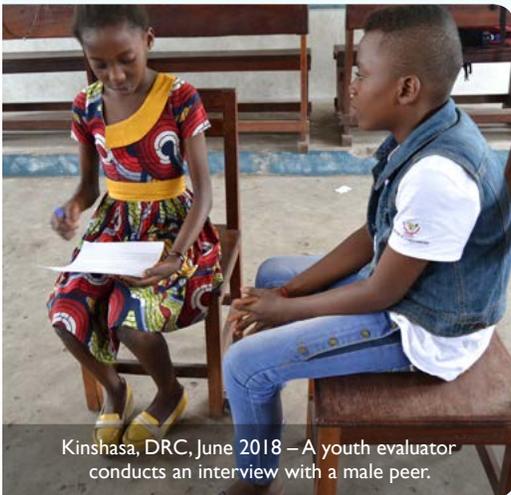
Healthy relationships and RH communication. By Wave 2, out-of-school VYAs in Growing Up GREAT! showed increased communication with someone (assumed to be either a peer or a supportive adult), including romantic relationships (OR=2.09 [1.15, 2.79]) and contraception (OR=2.04 [1.05, 3.95]) compared to controls. These effects were most pronounced among younger out-of-school VYAs (under 12 years) for discussing contraception (OR=13.30 [2.61-68.2]) as compared to the control group, and among out-of-school girls of all ages for discussions about romantic relationships, as compared to the control group (OR=4.44 [1.74, 11.33]).

Reduction in teasing, bullying, and physical violence. By Wave 2, the Growing Up GREAT! group showed a more significant drop in teasing and physical abuse than the control group. Compared to controls, the out-of-school boys in the Growing Up GREAT! group were less likely to slap and kick, or act in other physical ways than their peers (OR 0.50 [0.28, 0.88]). Out-of-school boys and girls in Growing Up GREAT! were less likely to report having been teased in the past six months.

Gender equity for girls and boys. Significant attitude shifts were seen among Growing Up GREAT! VYAs in the sharing of household chores. Compared to the control group, VYAs in Growing Up GREAT! were twice as likely to agree with the statement that boys and girls should be equally responsible for household chores. In-school VYAs were two times more likely to agree with this statement and out-of-school VYAs were more than three times (OR=3.57 [2.27, 5.60]) more likely to agree relative to the control group. This effect was especially strong for out-of-school girls in Growing Up GREAT!, who were eight times (OR=8.08 [3.79-17.25]) more likely to approve of equal chore sharing compared to controls. Out-of-school boys in the intervention group were over two times more likely to say they shared chores with their sisters in the month before the Wave 2 survey (OR: 2.50 [1.15, 5.46]) compared to those in the control group. No shifts were seen, however, in gender stereotypical traits and roles, for example views of male toughness and female vulnerability, and roles where a woman should take care of her family and the home and a man should be the one who brings in money. Similarly, no shifts were seen in the sexual double standard, wherein boys are socially rewarded for romantic and sexual activity while girls are penalized.

Box 2 summarizes **qualitatively** what VYAs felt were the most significant changes brought about by Growing Up GREAT!

BOX 2 FROM THEIR PERSPECTIVE: Key changes noted by VYAs



© 2018, Florentine Gracia Diantisa, Save the Children

Kinshasa, DRC, June 2018 – A youth evaluator conducts an interview with a male peer.

The most significant changes for **VYA girls and boys** were home-focused:

- Improved knowledge and practice of gender equity in the family.
- New understanding of how children and adolescents should be engaged in household chores.
- Appreciation of new time management at home by parents/caregivers, e.g., having time for studying.

“Before, I didn’t do anything like chores at home. I spent my time playing football with my friends... At the Growing Up GREAT! Club, I learned about all the household chores [that have to be done]. What girls did, I also started to do. I believe that it is good for a boy to do chores...” —VYA BOY, 12 YEARS OLD

Source: 2018 Participatory Qualitative Evaluation



KEY FINDING 2: Growing Up GREAT! cultivates supportive parents, teachers, and health care providers to guide VYAs through pubertal development

The GEAS quantitative data asked VYAs about changes they saw in their parents/caregivers. Findings highlight that adults substantially changed their attitudes and behaviors, demonstrating more equitable relationships and supportive communication.

Modeling gender equity and two-way communication. By Wave 2, significantly more VYAs in the intervention reported that their parents/caregivers were more gender-equitable by assigning boys household chores. These VYAs also reported increased communication with parents/caregivers on contraception. Out-of-school VYAs were about 1.6 times more likely to discuss pregnancy with a parent or adult [OR: 1.64

(0.51, 5.33)] compared to controls. This was true regardless of VYA age. Adults' responses from the participatory qualitative evaluation about their communication and gender-equal actions towards children in the home are shared in Boxes 3 and 4.

Connectedness and caring between VYAs and their parents/caregivers. By Wave 2, VYAs who participated in Growing Up GREAT! were 1.5 times more likely to feel cared for by their parents/caregivers than the control group. Also, out-of-school VYAs participating in the intervention reported greater connectedness with their parent/caregiver than the control group.

Parent/caregiver awareness and monitoring of VYA activities. Caregiver monitoring is defined as awareness of adolescents' whereabouts and school performance, and who their friends are. By Wave 2, little change in caregiver monitoring was reported by VYAs in the intervention versus control, perhaps because as Growing Up GREAT! started, two-thirds to three-quarters of VYAs reported that parents/caregivers were already connected, caring, and engaged in their daily lives.

Providing for and protecting VYAs. A final element of being a caring parent/caregiver revolves around ensuring children's protection via awareness of their actions and whereabouts. This is addressed in the GEAS findings on parental monitoring, above, and reflected in the participatory qualitative evaluation (see Box 3).

BOX 3 FROM THEIR PERSPECTIVE: Key changes noted by parents/caregivers

The most significant changes for **parents/ caregivers of VYAs** were in communication and attitudes and intentions to practice gender-equitable actions towards their children in the home. VYAs and parents/caregivers now talk about puberty and other sensitive issues. They have:

- Learned from their children
- Gained a better understanding and practice of gender equity in household activities.
- Better understand the principles of supervision of adolescent children.
- Have an increased understanding of how supervision and protection need to extend equally to boys and girls.



© 2018, Save the Children

Kinshasa, DRC, June 2018 – A youth evaluator conducts an interview with a male caregiver.

“Now, I don’t shout at them anymore. When there is a problem, we sit down and reason together. The children have become more understandable, and I no longer shout.” —MOTHER OF VYA

“I did not know how to supervise and educate my children well. In the Growing Up GREAT! activities, I learned that all children are equal. Now, [my son] wakes up in the morning and draws water and helps his sister do the dishes.” —FATHER OF VYA

Source: 2018 Participatory Qualitative Evaluation

Qualitative data from parent interviews reflect these quantitative survey findings. During interviews, parents/caregivers noted they were now increasingly using two-way communication instead of shouting to communicate with the children in their home. Box 3 summarizes the parents'/caregivers' reflections about the most significant changes from Growing Up GREAT!

Qualitative data also indicate that Growing Up GREAT! encouraged teachers and health care providers to support VYAs in their journey through puberty. After participating in Growing Up GREAT! activities, teachers and providers view VYAs in a more positive light, remarking that they see VYAs as adolescents with their own ideas, rather than children with more limited capacities. Accordingly, teachers and healthcare providers are using new skills and ways of interacting and communicating that support VYAs in more gender-equitable and adolescent-friendly ways, as summarized in Box 4.

BOX 4 FROM THEIR PERSPECTIVE: Key changes noted by teachers and health care providers

Teachers mentioned these most significant changes:

- Having easy-to-use student and teacher materials, even for sensitive subjects
- Being able to combine didactic classroom lessons with game-type activities of Growing Up GREAT! to facilitate VYA engagement and assimilation
- Being impressed with how children developed as VYAs and their openness to discussions on topics such as puberty

“Many of the things in the family life education curriculum were taboo...Certain words were not pronounce-able, and it was abstract... But, with Growing Up GREAT!, books are made available. They provide information on all the subjects taught. The teacher and the children have the content [illustrated] with pictures. I am comfortable when I am in front of the children to speak...” —MALE TEACHER

“Adolescents only consulted us during illnesses and were accompanied by their parents... After the activities of Growing Up GREAT!, adolescents now come to the health center to consult us and to ask questions about puberty and adolescence. We guide them with the correct explanations...”

—MALE PROVIDER

Health care providers mentioned new opportunities and skills to interact with VYAs, and how exchange visits with VYAs improved their understanding of VYA needs:

- Providers were impressed and surprised by the level of VYA knowledge about puberty, body changes, and gender norms, and their openness to asking question and discussing such topics
- Providers’ felt they improved their relationship with young clients, e.g., using knowledge and skills received from training in adolescent RH

Source: 2018 Participatory Qualitative Evaluation

Future directions

Findings from the two studies here indicate that Growing Up GREAT! improves the knowledge, skills, and gender awareness of VYAs and the adults in the lives of VYAs. These positive findings raise new questions. Could program effectiveness be further improved, particularly in the areas of gender-stereotypical roles and traits where less impressive gains were observed? Do some components or materials require tweaking to perform better, leading to norms-shifting? Why does Growing Up GREAT! work better for out-of-school than in-school clubs? Is it because VYAs who are unable to attend school are ‘hungrier’ for information or more regular attendees of Growing Up GREAT! sessions? Or is it due to differences in implementation: more skilled youth trainers facilitate many of the out-of-school clubs? Answers to the above questions are being sought in future GEAS waves and rapid program studies to guide program adjustments.

The Global Early Adolescent Study (GEAS) is continuing. Additional waves of data collection are planned to track changes over time in the VYA cohort. GEAS will continue to explore how gender and other factors influence VYA health and well-being as they move into older adolescence, building the evidence for investment in programs reaching VYAs.

The Growing Up GREAT! Program is evolving and expanding to new schools, health centers, and communities. With an eye towards sustainability, over the next two years, Growing Up GREAT! is reinforcing the capacity of Ministry of Education trainers to support teachers to include Growing Up GREAT! in classroom-based family life education; and supporting the Ministry of Health and community-based organizations to support continued health exchanges and integrate parent and community-based activities into their programs.

© 2021 Institute for Reproductive Health, Georgetown University

Recommended Citation:

Growing Up GREAT! Shows Promise in Skills Development and Norms Shifting After One Year. January 2021. Washington, D.C.: Institute for Reproductive Health, Georgetown University for the U.S. Agency for International Development (USAID) and the Bill and Melinda Gates Foundation.

Attribution Statement:

This brief was prepared by the Institute for Reproductive Health at Georgetown University (IRH/GU), The Global Early Adolescent Study at Johns Hopkins University (GEAS/JHU), Save the Children and the Center on Gender Equity and Health at the University of California San Diego (GEH/UCSD) under the Passages Project with additional support from the Bill & Melinda Gates Foundation. This brief and the Passages Project are made possible by the generous support the American people through the United States Agency for International Development (USAID) under the terms of the under Cooperative Agreement No. AID-OAA-A-15-00042. The contents are the responsibility IRH, GEAS, Save the Children and GEH and do not necessarily reflect the views of Georgetown University, the University of California San Diego, the Bill & Melinda Gates Foundation, USAID, or the United States Government.



www.passagesproject.org



info@passagesproject.org



[@PassagesProject](https://twitter.com/PassagesProject)



USAID
FROM THE AMERICAN PEOPLE

Passages