



Best Practices in Egypt:

**Youth Awareness and Action
(Shabab Week)**



Youth get involved in Shabab TAHSEEN village activities

The CATALYST Consortium is a global reproductive health and family planning activity initiated in September 2000 by the Office of Population and Reproductive Health, Bureau for Global Health of the United States Agency for International Development (USAID). The Consortium is a partnership of five organizations: Academy for Educational Development (AED), Centre for Development and Population Activities (CEDPA), Meridian Group International, Inc., Pathfinder International and PROFAMILIA/Colombia. CATALYST works in reproductive health and family planning through synergistic partnerships and state-of-the-art technical leadership. Its overall strategic objective is to increase the use of sustainable, quality reproductive health and family planning services and healthy practices through clinical and nonclinical programs.

Mission

CATALYST's mission is to improve the quality and availability of sustainable reproductive health and family planning services.

The author's views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development or the United States Government.

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THE NEED

In Egypt, where 37.3% of the population is between 0–14 years old and young people aged 10–24 comprise 34.4 % of the total population,¹ the need to focus on the health needs of this group as they approach adolescence and young adulthood should be underscored. Egyptian adolescents and young adults face a wide variety of reproductive health/family planning (RH/FP) challenges such as early marriage, early onset of pregnancy, lack of birth spacing, lack of access to health care and gender-based violence, especially in rural Upper Egypt. For example, women in rural Upper Egypt marry at a younger age than do their counterparts in rural Lower Egypt—17.7 years and 19.3 years respectively.² In addition, cultural taboos prevent young people from talking about RH/FP issues—this is well known to health professionals and clearly demonstrated by research conducted by TAHSEEN. In Egypt, youth interests are represented by a number of groups and agencies; however, a large number of youth are not reached, informed or mobilized.

THE TAHSEEN SOLUTION

Given that it is culturally unacceptable for unmarried youth³ to seek out reproductive health and family planning information, TAHSEEN and its partners needed to find new ways to reach them. The members of TAHSEEN's first youth committee in Minia suggested **Shabab TAHSEEN Week (STW)** where promising youth leaders—equal numbers of females and males—attend a structured, six-day program of community service, sporting activities, and reproductive health/family planning education, so that they can raise their awareness on RH/FP as well as that of their community. Components of the Shabab TAHSEEN Week program include:

- **Community service.** Participating teens decided on a community-service project and then implemented it. Their activities included repairing school desks, painting school walls, creating reproductive RH/FP posters, removing trash from around schools and planting trees on school grounds.
- **Reproductive health sessions.** The Youth Committee organized daily presentations for youth about reproductive health and family planning (optimal birth spacing, age at marriage, hygiene, substance abuse, female genital mutilation, puberty changes), and other life-skills topics (the value of community service and voluntarism).
- **Question-and-answer seminars.** Religious leaders from the Youth Committee and local community paired with medical professionals to answer questions posed by the youth about reproductive health and family planning.
- **Mobile clinics.** The MOHP at the governorate level made its district-level mobile clinics available (for family planning, pediatrics, internal medicine, dermatology,

¹Egypt Demographic and Health Survey 2000, Fatma El-Zanaty and Ann A. Way, 2001. Cairo Egypt

²Egypt Interim Demographic and Health Survey 2003, Fatma El-Zanaty and Ann A. Way, 2004. Cairo Egypt

etc.) to STW. Youth helped organize community visits, assisting clients to check in and distributing MOHP pamphlets on reproductive health and family planning topics.

- **Sporting events.** The Ministry of Youth and Sports organized sporting events every day for participating youth.
- **Parents' seminars.** This demand-driven activity was added to the STW program during 2005 in response to requests from participating youth and their parents. The main topic is youth-adult communication with a special focus on the topics addressed during STW and others specifically requested by the community such as early marriage, FGC, and girls' education.
- **Closing events with parents.** At the end of the week, parents were invited to attend closing-day events, which included a variety of activities, such as presentations on optimal birth spacing and a play or puppet show containing several reproductive health and family planning messages. By involving parents, TAHSEEN hopes to give them the stimulus and information they may need to engage in a dialogue with their teenage children.

Shabab TAHSEEN Village. As a result of STW, the Minia Youth Committee sensed that youth had great untapped potential to mobilize their communities. At the same time, the Committee was aware that people in small hamlets were not always aware that a clinic in a neighboring village had been renovated, was offering better and more diverse services, or even featured the services of a visiting specialist from Minia University. The Minia Youth Committee sensed an opportunity to challenge youth leaders to raise community awareness both of available clinic services and of general reproductive health messages.



All community members are involved in Shabab TAHSEEN village activities

In November 2004, 20 youth from each one of five small hamlets were brought together for four days through a pilot program called Shabab TAHSEEN Village. The program was structured accordingly:

- **Day 1: Learn about reproductive health/family planning.** Youth gathered in a local home to learn about clinic renovations, the range of services offered by the clinic, the value of community service, optimal birth spacing, ideal age at marriage, and other reproductive health topics. Messages were reinforced through a puppet show attended by youth.

- **Days 2 and 3: Mobilize the community.** On the second day, youth made posters illustrating what the clinic was like before and after the renovation supplemented by photographs. They also began conducting home visits in pairs to tell their families and neighbors about clinic renovations, the types of services available, and the presence of the specialist at the clinic.
- **Day 4: Facilitate visits to the clinic.** On the last day, transportation was available in the five communities to bring interested community members to the renovated clinic.

RESULTS

Scale-up: As of June 2005, TAHSEEN has scaled-up STW to 44 communities in Minia, Beni Suef, and Fayoum governorates and three poor urban areas in Cairo, reaching a total of 1944 young people.

Replication:

- One community continues to hold STW even without TAHSEEN or youth committee assistance.
- The National Council for Childhood and Motherhood (NCCM), the government council responsible for child protection and development in Egypt, has already adapted and implemented the activity in two poor urban areas of Cairo, where 260 youth have completed an offshoot of the STW program. NCCM now replicates the program independently of TAHSEEN involvement.
- In Towa and Mallahia, Beni Suef Governorate local councils, community development associations and youth centers have adopted the program and replicated it without any help from TAHSEEN.
- **Increased knowledge among youth leaders.** Pre- and posttests (from the last quarter of 2004 to the last quarter of 2005) from both programs show that the educational sessions were successful in increasing the knowledge of youth leaders (see the table below):

Table 1: Knowledge increases in youth participating in Shabab TAHSEEN Week (n=1944)

Topics	pre	post	Chi-square	p value
OBSI is 3-5 years	65%	95%	469.02	p<.001
Benefits of spacing (healthy fetus)	45%	74%	291.86	p<.001
Recommended age for girls marriage (18 years)	67%	82%	99.15	p<.001
Optimal age of first pregnancy (20 years)	58%	82%	229.01	p<.001
Complications of female genital cutting (physical & psychological)	20%	74%	978.94	p<.001
Puberty changes (physical & psychological)	32%	83%	890.41	p<.001

Local enthusiasm for intergenerational dialogue. Anecdotal evidence from local coordinators suggests that participating youth have not only taken the initiative to talk openly with peers but have also engaged their parents in discussions about reproductive health/family planning, effectively ending generations of silence.

At a graduation ceremony in Beni Suef Governorate the father of two Shabab TAHSEEN Week participants stood before youth, parents and governorate representatives and shared his opinion. “I was not aware of this project ...Then my son came home and wanted to discuss subjects that surprised me, like family planning. I wonder why the authorities do not promote this kind of dialogue between father and son, father and daughter.”

Several girls who had participated in the program shared their ideas:

“We liked what we heard. In our arts and crafts class we created a painting showing husband and wife discussing FP.”

“Our local CDA did a great job. We learned what volunteerism and community work is. We talked about smoking, circumcision for girls and early marriage. The religious leaders were especially helpful explaining everything to us.”

- **Increased service use by community members.** Clinic use by adult community members during Shabab TAHSEEN Village increased considerably. On the final day of the STV activity, youth facilitated transportation to the renovated clinic for 657 residents of the five hamlets where the program took place.

