

SUPPLEMENTAL GUIDE TO THE 2020 ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH TOOLKIT IN HUMANITARIAN SETTINGS FOR YOUTH-LED ORGANIZATIONS



Inter-Agency Working Group on
Reproductive Health in Crises



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ACRONYMS AND ABBREVIATIONS

ART	Antiretroviral therapy
ARV	Antiretroviral
ASRH	Adolescent sexual and reproductive health
ASRHR	Adolescent sexual and reproductive health and rights
CBI	Care Best Initiative
CHW	Community health worker
HIV	Human Immunodeficiency Virus
GBV	Gender-based violence
IAFM	Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings
IAWG	Inter-Agency Working Group on Reproductive Health in Crises
IEC	Information, education and communication
LARC	Long-acting reversible contraception
LGBTQIA+	Lesbian, gay, bisexual, transgender, intersex, asexual+
MAA	Midwife in Action's Association Vyara Uheke
MISP	Minimum Initial Service Package
MOH	Ministry of Health
OCA	Organizational capacity assessment
PEP	Post-exposure prophylaxis
SRH	Sexual and reproductive health
SRHR	Sexual and reproductive health and rights
STI	Sexually transmitted infection
SWG	Sub-working group
TBA	Traditional birth attendant
UN	United Nations
UNFPA	United Nations Populations Fund
WASH	Water, sanitation and hygiene
WHO	World Health Organization
VCAT	Values Clarification and Attitudes Transformation
YLO	Youth-led organizations
YPCC	Young Person Co-Chair
YPP	Youth peer provider



Photo: Jonathan Hyams

ABOUT THE GUIDE

What is the guide?

This is a supplemental guide to the [2020 Adolescent Sexual and Reproductive Health \(ASRH\) Toolkit for Humanitarian Settings](#), specially tailored for youth-led organizations (YLOs). The IAWG ASRHR SWG organized and led the development of this guide with a co-development team of young people, members of YLOs, and IAWG ASRHR SWG members. The guide aims to support YLOs to take their rightful place within humanitarian coordination and programming for ASRHR.

Why was the guide developed?

During the revision of the 2020 ASRH Toolkit for Humanitarian Settings, IAWG collected feedback and inputs from approximately 90 young people, among other stakeholders. Part of young people's feedback was that an additional guide should be developed alongside the ASRH Toolkit that responds to the needs, preferences, and resources available from a YLO perspective. Harnessing the potential of YLOs helps to ensure that young people are not neglected across humanitarian and other global health interventions, in addition to addressing the unique sexual and reproductive health and rights (SRHR) needs of adolescents and youth and following global best practices of meaningful engagement of young people.

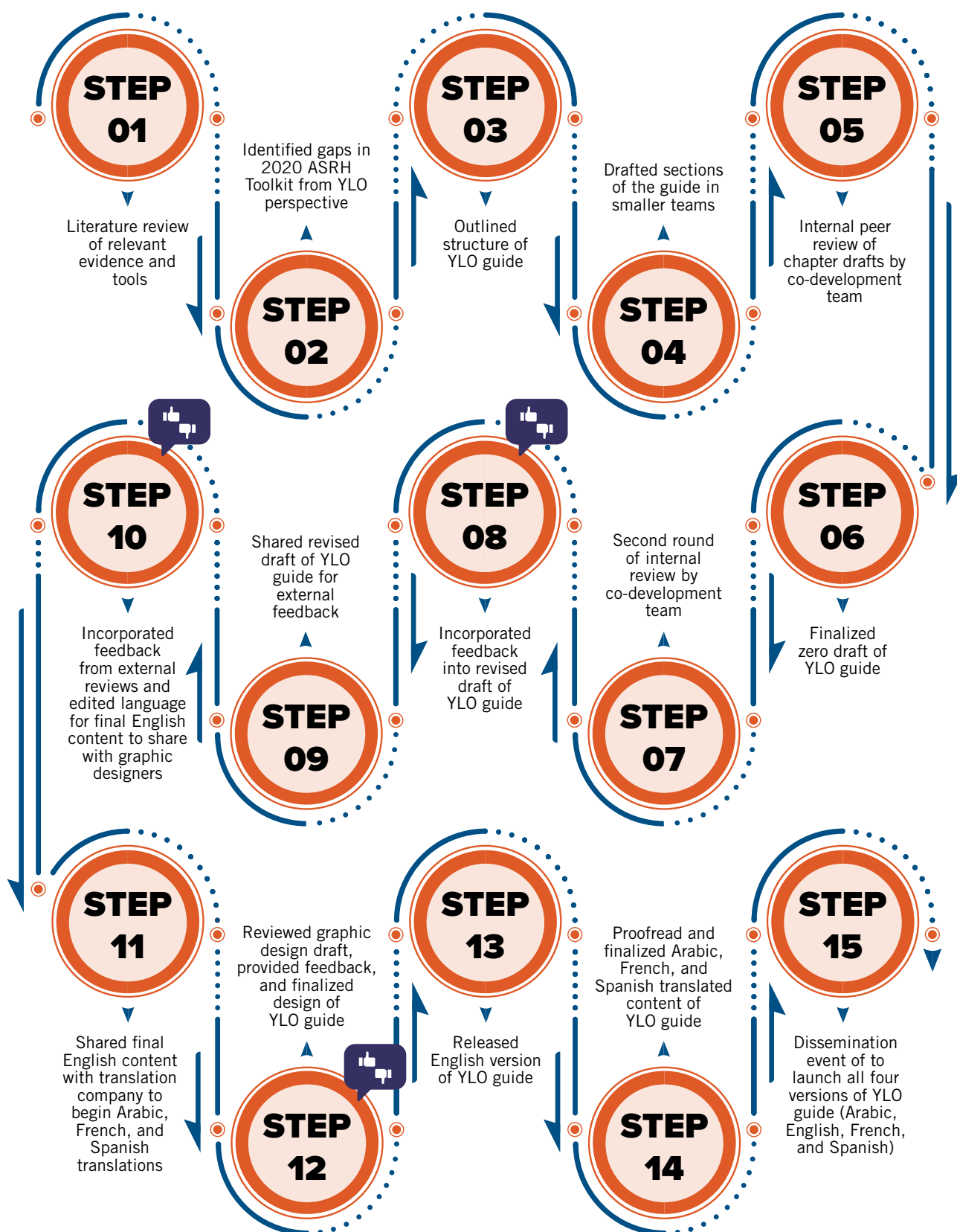
This guide does not replace the 2020 ASRH Toolkit for Humanitarian Settings—it is intended to cover the most essential information for YLOs, signpost to key materials for YLOs, and adapt and create materials that are relevant and appropriate for YLOs, as needed. It also complements the [Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings](#) (IAFM) and the [Minimum Initial Service Package for Sexual and Reproductive Health in Crisis Situations](#) (MISP).

How was the guide developed?

The process of developing the guide took over one year, not including the time required for mobilizing the funding to support the creation and dissemination of the guide. Figure A shows a visual of the entire process, with more details provided below.

In August 2022, the IAWG ASRHR SWG put out a call for interest to SWG members and their networks of young people to be a part of the guide's co-development team. In September and October 2022, the group who responded to the call of interest created a terms of reference for the co-development team and commitment letters for team members to sign. In recognition of their time and efforts, team members were eligible to receive a small stipend (for young people only). For the remainder of 2022, the team conducted a desk review of existing resources and tools for YLOs implementing ASRH programs in humanitarian settings and developed an outline of the guide. From January to August 2023, the team produced a zero draft of the guide, based on the outline, before peer-reviewing, editing, and revising the guide to share a final draft with the SWG and ASRHR stakeholders for feedback in September 2023. The team incorporated comments, conducted a final review, and worked with the graphic designer to insert visual elements and the design of the guide during October 2023. In November and December 2023, the team finalized the English version of the guide, worked with a translation company to develop the Arabic, French, and Spanish versions of the guide, and finalized a dissemination strategy.

Figure A: YLO Supplemental Guide Development Process



Who is the guide for?

The guide is for all YLOs who are supporting adolescents in humanitarian settings to make informed and autonomous decisions about their sexual and reproductive health (SRH), guarantee their SRH rights, and be able to reach their full potential—in their intersecting diversities.

While this guide is primarily intended for YLOs working in humanitarian settings, other audiences may find this resource beneficial to their organizations, advocacy, and programming, including:

- YLOs working in stable settings, especially areas at risk of crises.
- Community-based organizations serving young people in humanitarian and stable settings.
- Young people living and working in humanitarian and stable settings.
- Agencies and organizations working with YLOs (e.g. donors, international organizations, UN agencies, etc.), referred to as youth-serving organizations throughout the guide.

These audiences can explore the guide to better understand the strengths, opportunities, challenges, and overall operating conditions of YLOs in humanitarian settings. Youth-serving organizations in humanitarian settings, in particular those who plan to fund and/or partner with YLOs to implement ASRH programs in emergency contexts, should pay special attention to the “How-To” breakout boxes, which often discuss advice and ways for YLOs to advocate with youth-serving partners for more equitable partnerships and/or overcome challenges.

How to use the guide?

This guide aims to highlight the most essential information for YLOs supporting ASRHR across the humanitarian continuum—not only during the crisis phase, but also before its onset, during the recovery, and beyond, towards long-term development. Humanitarian emergencies rarely take a straight path from emergency to stability; they are complex and experience overlapping crises at times. Therefore, this guide does not advocate for one approach to use for all settings or circumstances; instead, it offers strategies and tools, based on evidence and international standards, for youth-led and youth-serving organizations to adapt.

To minimize duplication, existing guidance and materials are signposted throughout the guide and denoted with a ! sign to call your attention to the resource, as well as important information included in the guide. The guide also provides call-out boxes for case studies and how-to's; examples are included below.

CASE STUDY BREAKOUT BOX

This is an example of a case study breakout box and what it will look like in the guide. YLOs from the co-development team, as well as from the IAWG ASRHR SWG provided examples of how to implement tools and/or best practices from the guide. These case studies are included throughout the entire guide.



HOW-TO BREAKOUT BOXES

This is an example of a how-to breakout box and what it will look like in the guide. These how-to boxes are provided throughout the guide for YLOs to use as advice on specific topics, but other audiences of the guide (youth-serving organizations) may also find these boxes helpful when working with YLOs.



! SIGNPOST TO IMPORTANT INFORMATION

This is an example of a call-out breakout box for signposting important materials and/or information in the guide. These call-out boxes are provided throughout the guide.



Terminology

This guide is about delivering SRH programs and services to adolescents and youth in humanitarian settings, with materials tailored for a YLO audience. This guide uses the definition of SRH from the 1994 ICPD Programme of Action and also described in the [FP2020](#) and [IAWG Ready to Save Lives Toolkit](#):

“Sexual and reproductive health (SRH) is a state of complete physical, mental, and social well-being (not merely the absence of disease and infirmity) in all matters relating to the reproductive system and its functions and processes. SRH therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when, and how often to do so. Implicit in this last condition are people’s rights to be informed and have access to safe, effective, affordable, and acceptable contraceptive methods and their choice, as well as other interventions and strategies for fertility regulation that are not against the law. People should have the right to access appropriate health care services that will enable women [and young girls] to go safely through pregnancy and childbirth and provide individuals and couples with the best chance of having a healthy infant.”

You will see ASRH, ASRHR, SRH, and SRHR terms used within the guide. As discussed in the ASRH Toolkit, ASRH includes sexuality and reproductive health processes, functions, and systems of adolescents, their right to make decisions about their body, and their access to services that support that right. Thus, provision of ASRH information and services (and SRH in general), is rights-based, as well as lifesaving.

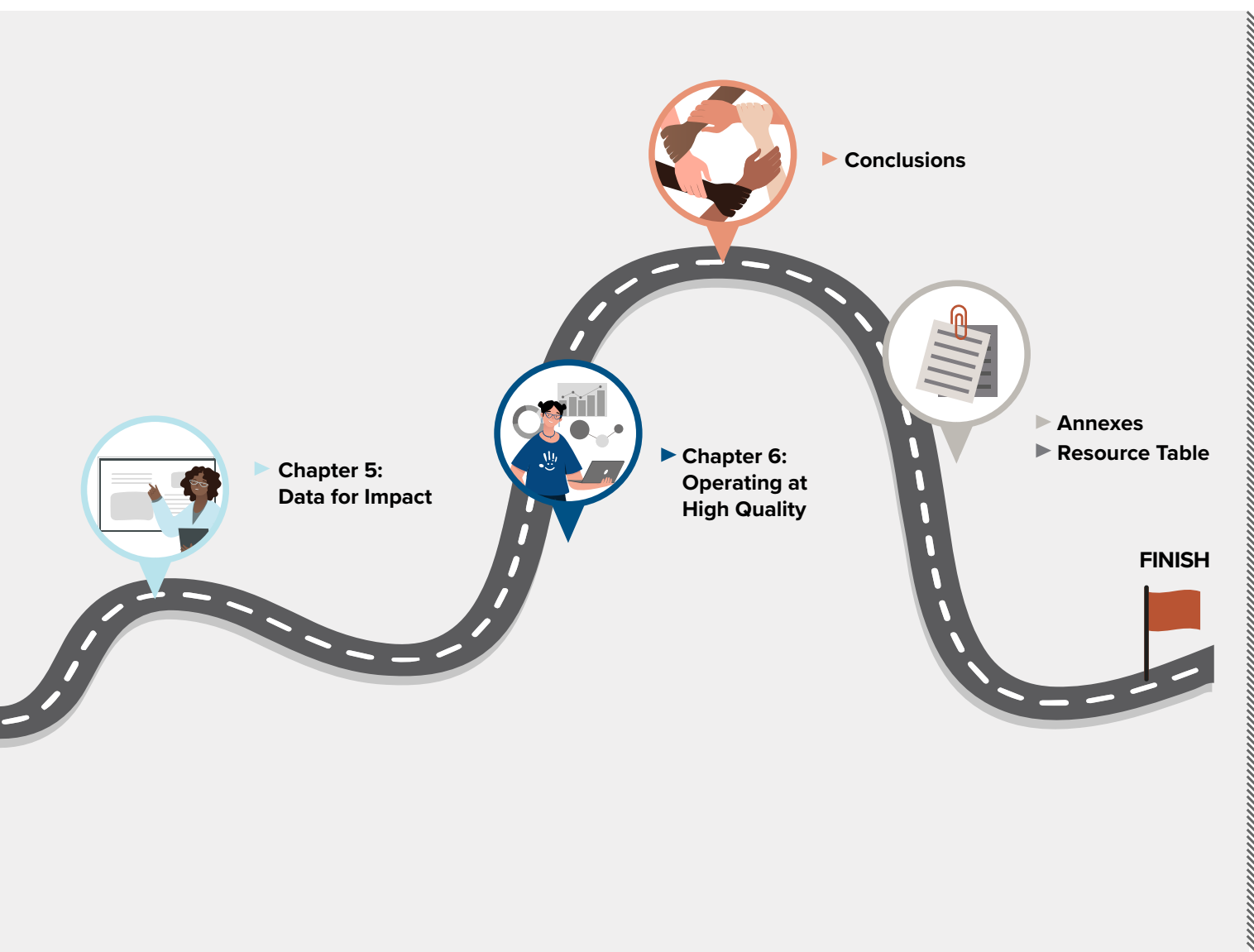
If any SRHR language in this guide is unfamiliar, please refer to the [2020 ASRH Toolkit for Humanitarian Settings](#) and [CHOICE for Youth and Sexuality glossary](#).

Figure B: Roadmap to the YLO Supplemental Guide to the 2020 ASRH Toolkit



Navigating the guide

Figure B shows a roadmap to help visualize how you can navigate through the guide. Each chapter has an associated icon and color to help you quickly identify which chapter you want to find. Additionally, each chapter begins with a short introduction to the chapter, outlining the subsections and providing the key points from that chapter. For the overall takeaways from the entire guide, see the section below, as well as the Conclusions.



The guide is structured as follows:

- **Chapter 1: ASRHR in Emergencies 101**

- Provides key elements of ASRHR in crises—including the unique needs of adolescents in humanitarian settings, Adolescent-Inclusive MISRP, adolescent- and youth-friendly SRH services, and components of holistic care

- **Chapter 2: Supporting ASRH Services in Humanitarian Settings**

- Outlines the important roles that YLOs can play in strengthening ASRH services across the humanitarian continuum, both for facility- and community-based programs, and the links between the two

- **Chapter 3: Mobilizing and Sustaining Engagement**

- Describes ways for YLOs to support the active participation of young people in ASRH programming and services, including building engagement and cohesion, meaningful and ethical participation, and ensuring sustainability

- **Chapter 4: Equitable and Sustainable Partnerships**

- Delves into the principles and approaches of equitable and sustainable partnerships in humanitarian systems, highlighting the benefits and challenges facing YLOs, as well as proposed solutions

- **Chapter 5: Data for Impact**

- Explains the importance of data in humanitarian programming, approaches to planning, monitoring, and evaluating data, as well as learning and using data for decision-making for YLOs

- **Chapter 6: Operating at High Quality**

- Outlines ways to support YLOs to operate at high quality and demonstrate this high quality to donors and other youth-serving partners to YLOs

- **Chapter 7: Conclusions**

- Emphasizes the key points of the guide

- **Annexes**

- Includes adapted tools from other resources

- **Resource Table**

- Includes citation and links to all referenced materials in the guide, organized by chapters



TAKEAWAYS FROM THE YLO GUIDE

All the information, tools, and resources in the guide were carefully chosen for inclusion. To help the reader, the co-development team identified the following list of key takeaways for YLOs implementing ASRH programs, services, and activities in humanitarian settings.

Key takeaways



- YLOs provide unique and valuable contributions to humanitarian responses, strengthening the impact of interventions that address the diverse SRH needs of adolescents and young people. This includes supporting implementation of the Adolescent-Inclusive MISP.



- YLOs and their allies must advocate for their inclusion within humanitarian activities and be supported by allies to be meaningfully involved, including in the terms of reference of coordination bodies. This will help YLOs to communicate, promote, and share their unique value-add to humanitarian responses and to foster an enabling environment for their involvement.



- YLOs should be supported to have equitable and sustainable partnerships with other humanitarian actors such as donors, international organizations, and UN agencies, including resources on how to negotiate these relationships. YLOs can and should hold other humanitarian stakeholders (including funders) accountable for putting the needs and perspectives of young people at the center of ASRH programming.



- As with other humanitarian organizations, data and evidence are critical for understanding the diverse needs of people for who and with whom they work, for demonstrating success, for learning and improvement, and for effective advocacy and accountability to affected communities. Thus, it is critical that YLOs have resources and guidance accessible to their organizations on how to gather, monitor, and analyze data, as well as use data for decision-making.



- To help ensure YLOs can take their rightful place within humanitarian coordination and programming for ASRH, investments in key operational areas, such as YLO governance, financial management, and human resources, are critical. This is where partnerships with youth-serving organizations can be transformative, including capacity building and mentoring, advocacy, and support in mobilizing resources.



CHAPTER 1: ASRHR IN EMERGENCIES 101



Overview and key points

This chapter reviews some of the key elements of ASRH in crises from the [ASRH Toolkit](#), including:

- Unique needs of adolescents and youth in humanitarian settings
- Understanding the humanitarian architecture
- Implementing the Adolescent-Inclusive MISP
- Providing adolescent- and youth-friendly SRH services
- Adopting a holistic lens in ASRH programming

The key points from this chapter include:

- Adolescents, youth, and young people have unique SRH needs, risk factors, and capacities in humanitarian settings; thus, programming should not be implemented as a one-size-fits-all approach, but instead be tailored to the specific characteristics of the young people you are working and serving alongside.
- YLOs have a unique role to play in the coordination and implementation of activities across the humanitarian-to-development continuum—from preparedness activities, to response activities, and through to recovery activities—and throughout all phases of the project, including the design of the activities.
- The ASRH Toolkit outlines specific actions that youth-serving organizations can take to ensure implementation of the MISP is adolescent inclusive; this guide adapted the ASRH Toolkit's Adolescent-Inclusive MISP to be more relevant and appropriate for YLOs to implement.
- Providing adolescent- and youth-friendly services means putting adolescents and youth at the center of health programming to address their unique needs, barriers, opportunities, and environment. The Toolkit and guide use five principles to describe how to make SRH services more adolescent- and youth-friendly, which include making services accessible, acceptable, appropriate, effective, and equitable for all young people.

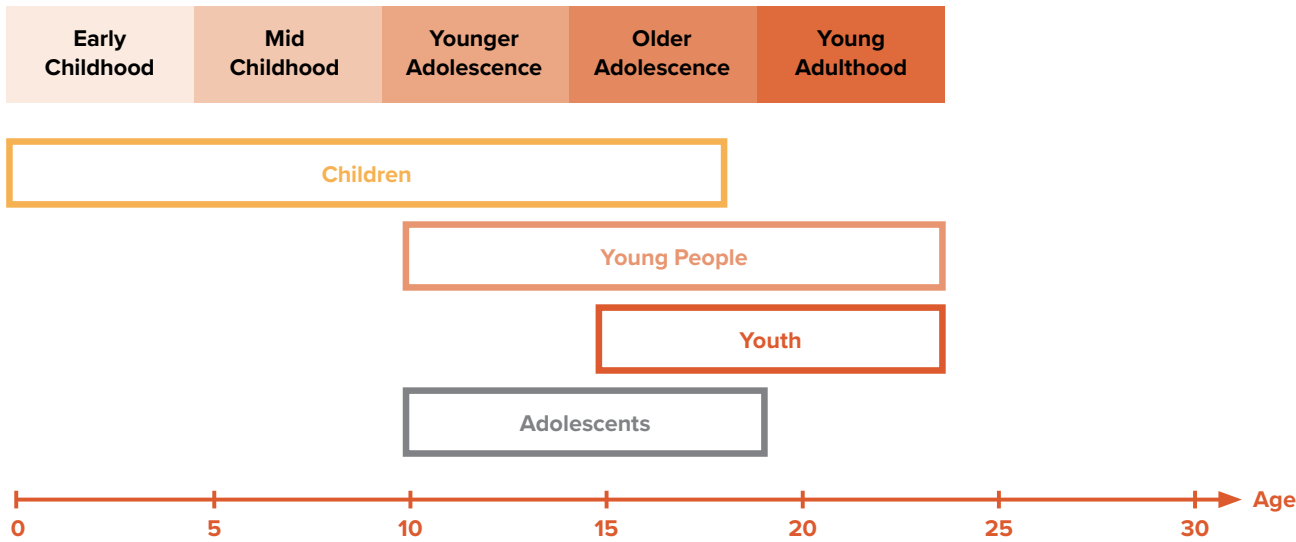
Unique needs of adolescents and youth in humanitarian settings

Accessible and quality SRH information and services are a basic human right for adolescents across the humanitarian continuum. They are also lifesaving—complications due to pregnancy and childbirth are a leading cause of death among adolescent girls globally.

Adolescents, generally recognized as people aged 10 to 19 years old, are not all the same! They include a diverse range of people with a variety of SRH needs. The period of adolescence also overlaps with other terms, including children, youth, and young people. While definitions of children, adolescents, youth, and young people vary across settings,

this guide uses the ASRH Toolkit’s categorizations, which are based on United Nations (UN) definitions. See Figure C for more information. Whichever definitions your organization uses, it is important that individuals between the ages of 10 to 19 are prioritized in your programming. Oftentimes, adolescents are combined with other categories of individuals, such as children or young people, and programs do not provide targeted outreach strategies to reach them and/or implement activities that address their unique needs and preferences. For example, when adolescents are not identified as a separate group for programming and put together with young people, the program tends to benefit older youth because they are easier to reach compared to adolescents.

Figure C: Adolescent or Young People?



There are also other subgroups within the adolescent age bracket, including very young adolescents (aged 10-14 years old), who have different needs, risk factors, and preferences compared to older adolescents (aged 15-19 years old) and older youth (aged 20-24 years old). Age is only one characteristic of adolescents and youth; YLOs should also be thinking about how to tailor their programming to address adolescent and youth needs based on their ability status, gender, sexual orientation, marital status, and a number of other factors. See the list below for some examples of the different subgroups of adolescents and youth that would require different SRH activities based on their unique needs. The ASRH Toolkit provides a more comprehensive list and details on why [these subgroups](#) have increased SRH needs compared to other adolescents and youth.

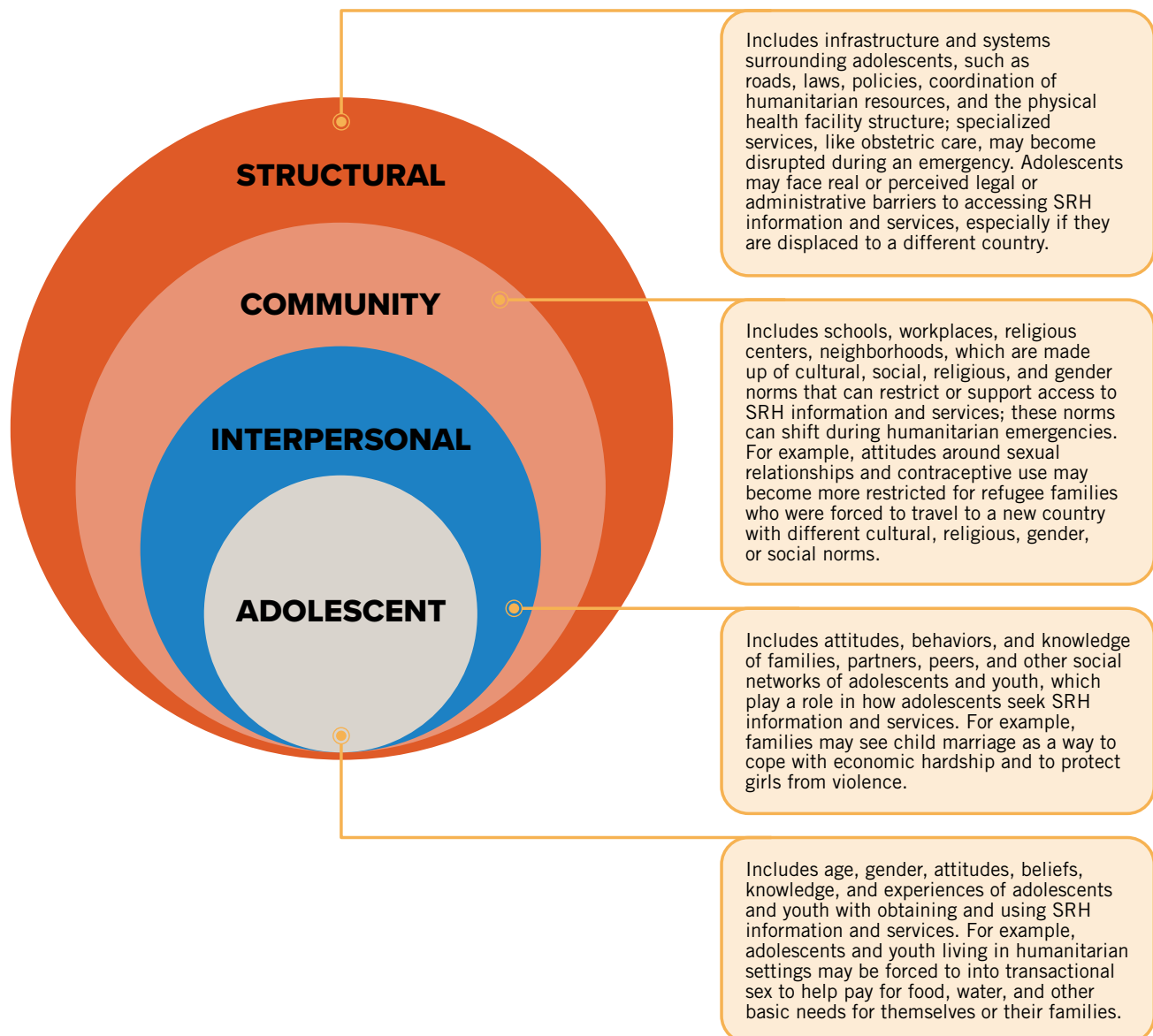
Some of the different groups of adolescents and youths include:

- Orphaned adolescents, unaccompanied minors, and adolescent head of households
- Adolescents at risk of sexual exploitation through transactional sex
- Married adolescents
- Migrant adolescents

- Pregnant adolescents and adolescent mothers
- Young people with disabilities
- Young people with diverse sexual orientations and gender identities

Many of the subgroups discussed above relate to the adolescent or youth's individual characteristics, which may also include their personality, education, confidence, or ability to seek quality SRH information and services. There are also factors outside of the individual that affect their access and use of SRH information and services. The ASRH Toolkit describes these combination of factors through the [Social-Ecological Model](#). Below is a brief summary of the different spheres of the model, as well as examples of how each relate to humanitarian conditions for adolescents and youth.

Figure D: Social-Ecological Model

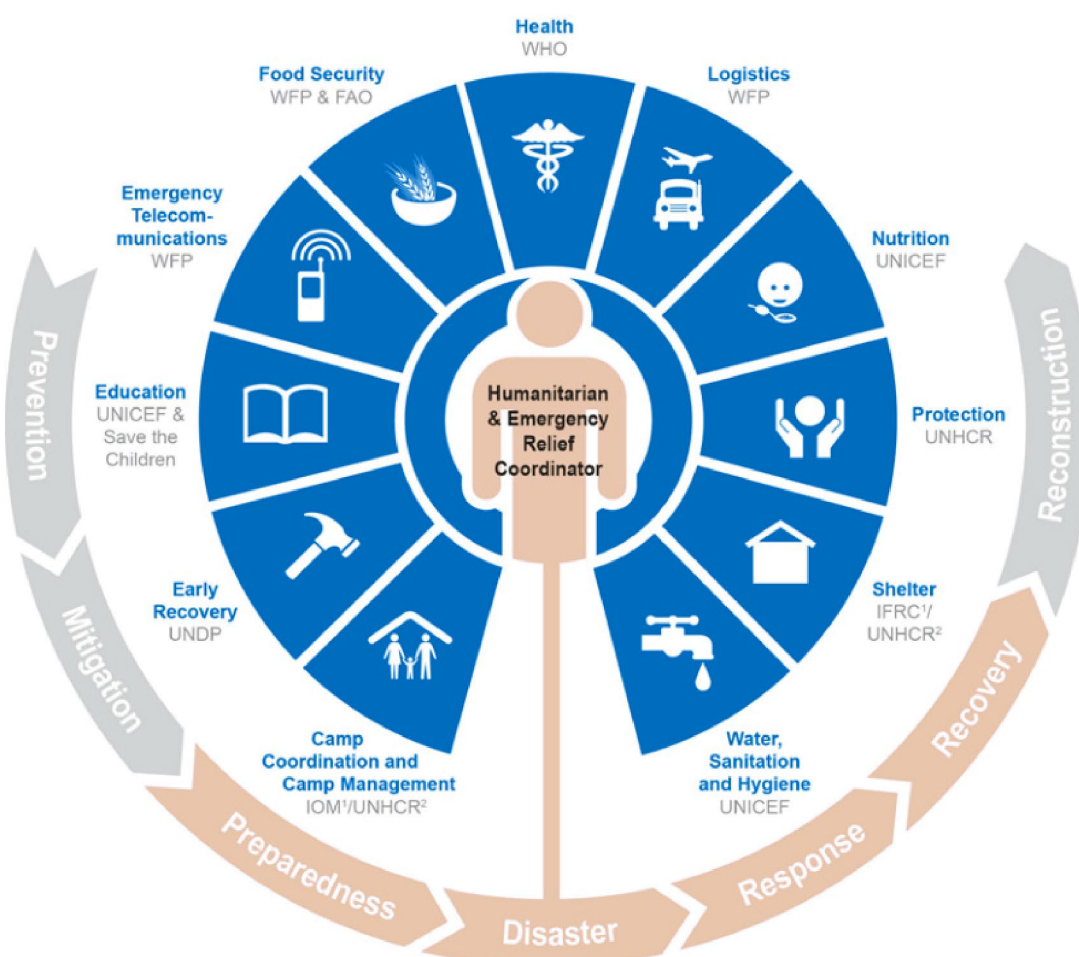


Understanding the humanitarian architecture

To understand how your YLO fits within the broader humanitarian coordination system, the guide provides an overview of the humanitarian cluster system—focusing on the health cluster, which typically hosts issues related to adolescent and youth SRHR.

A wide variety of actors are involved in humanitarian preparedness, response, and recovery. These can include government and non-governmental organizations, international and local actors, healthcare providers, gatekeepers, parents, and young people themselves. Coordination at the international, national, and subnational levels is managed through the cluster approach (see Figure E below). Collaborative and complementary efforts foster knowledge sharing, resource mobilization, and sustainability—strengthening the reach and impact of adolescent-inclusive MISP.

Figure E: Cluster Approach



In the cluster approach, SRH falls under the Global Health Cluster. In a humanitarian crisis, SRH working groups under the Health Cluster at the country level are sometimes established by the United Nations Populations Fund (UNFPA), but this is not currently a formalized process. A new [Global Health Cluster SRH Task Team](#) was formally approved in December 2022 to help systematize coordination for SRH.

It is good to be aware that not all clusters are likely to be operational in a given setting, and different language is sometimes used to refer to coordination bodies, such as sub-cluster or technical working group. In settings where there is no dedicated SRH Coordinator, the Health Cluster or Gender-Based Violence (GBV) sub-cluster may be involved in the coordination of SRH activities.

YLOs have a unique and valuable role to play in all aspects of humanitarian response, including preparedness, response, and recovery activities. See the below case study for an example of how Care Best Initiative advocated to become a co-lead of the SRH SWG in northeastern Nigeria. YLOs must make the case for their involvement in not only implementing and leading these activities, but also their engagement in the co-design of these projects, which is discussed further in the next section: Implementing Adolescent-Inclusive MISP.

CASE STUDY: SRH COORDINATION IN NORTHEAST NIGERIA

Care Best Initiative (CBI) is a women-led organization that partners with state and federal government, as well as international and national organizations, to improve the situation of conflict-affected communities in Northeast Nigeria, including the SRH of young women and girls.

CBI currently co-leads the SRH SWG for Yobe State, in partnership with the Yobe State Primary Health Care Management Board and UNFPA. The SRH SWG Group helps to strengthen collaboration and knowledge sharing between the different actors working on SRH. This helps to improve the efficiency and effectiveness—and avoid duplication—of SRH care for the affected population in Yobe State, including internally displaced persons, returnees, and host communities.

CBI is also an active participant of other coordination platforms at the state and national level to strengthen multi-sectoral linkages. These include the Health Cluster, Education in Emergencies Working Group, GBV Sub-Cluster, and Water, Sanitation and Hygiene (WASH) Cluster.



Implementing Adolescent-Inclusive MISP

The [MISP](#) defines the essential SRH services that should be implemented simultaneously at the onset of an emergency (within 48 hours, wherever possible). It is a coordinated set of priority activities aimed at preventing and responding to sexual violence, reducing Human Immunodeficiency Virus (HIV) transmission and other sexually transmitted infections (STIs), preventing unintended pregnancy, and transitioning to more comprehensive SRH services, as the situation permits. The MISP can be implemented without an in-depth SRH needs assessment. However, it is recommended to gather some

initial information on the demographics and health of the affected population for optimal delivery of MISP activities. The MISP is an international health standard within the [Sphere Minimum Standards in Humanitarian Response](#), and Chapter 3 of the IAFM provides more details and resources on the MISP, including a checklist for monitoring. However, the IAFM does not provide tailored information on implementing MISP activities inclusive of the needs of adolescents and youth; this is why the ASRH Toolkit developed the [Adolescent-Inclusive MISP](#).

No single organization is positioned to implement the MISP alone. YLOs can be a key partner for implementing the Adolescent-Inclusive MISP. YLOs can play a vital role in adolescent engagement and participation, advise on how services can be adolescent-friendly and culturally sensitive, and/or directly implement some of the activities in the Adolescent-Inclusive MISP.

This guide adapts the Adolescent-Inclusive MISP from the ASRH Toolkit for YLOs. In Table 1, you will see a header of each MISP objective, as well as one of the priority activities—safe abortion care. Underneath that objective (or priority activity) are the adolescent-inclusive activities humanitarian agencies can implement as part of the MISP, and next to each activity are examples of how YLOs can apply and/or adjust these activities to fit their organization.

HOW-TO ACTIVELY PARTICIPATE IN COORDINATION MEETINGS

Like all attendees of meetings, YLO representatives must be properly prepared to contribute to conversations. If you are sending someone to attend a coordination meeting from your YLO, make sure that person understands what to expect from the meeting (where to go, if there is a dress code, length of meeting, etc.) and how they can contribute (reviewing agenda, come with prepared questions, bring data to support your points). If you want your organization to do a presentation during a coordination meeting, ensure that person has all the information they need to develop their presentation and they have support in practicing their presentation, as well as any resources required to conduct their presentation. If your organization does not have someone who has experience attending coordination meetings, this is a great opportunity to ask other youth-serving organizations for an information exchange to ask questions and receive informal support.



Note: these examples are based on program experience and many have not yet been vigorously tested; however, they follow best practices of adolescent and youth engagement as well as [core humanitarian principles](#).

In addition, in [Annex A](#), the guide has provided a cheat sheet for implementing the Adolescent-Inclusive MISP for YLOs, which provides a quick reference to the main activities to implement to be inclusive of adolescents' SRH needs, as well as overall guidance for how YLOs can apply the Adolescent-Inclusive MISP to their organizations.

Table 1: Adapting Adolescent-Inclusive MISP to YLOs

Objective 1: Ensure the health sector/cluster identifies an organization to lead implementation of the MISP	
Adolescent-Inclusive Activities	Application to YLOs
Orient SRH Coordinator to ASRH needs and services	YLOs can advocate for facilitating and/or co-facilitating an orientation of ASRH needs and services for the SRH Coordinator.
Ensure adolescents and/or youth are included in coordination meetings and decision-making	<p>Adolescent and youth representatives from YLOs can attend coordination meetings, with preparation support and guidance from more experienced YLO staff and/or other youth-serving partners (see the How to breakout box above for participating in coordination meetings).</p> <p>YLOs can invite adolescents and youth they serve to speak on behalf of their community. Note: it is important to follow ethical considerations when engaging adolescents and youth from the community (see Meaningful and ethical participation subsection in Chapter 3 for more information).</p>
Leverage existing adolescent and youth networks to engage adolescents and youth, as well as local organizations, in stakeholder meetings Coordinate with other organizations to identify adolescents at increased risk and ensure that they have access to reproductive health services	YLOs often better understand the ways to reach adolescents and youth in their community and can utilize their networks to engage young people. In addition, YLOs often can engage subgroups of adolescents and youth that might be difficult or harder to reach for other organizations because of their trusted reputation and relationships with young people and the community.
Advocate with Health Cluster to ensure ASRH services and information are accessible to adolescents during MISP implementation	YLOs can speak up at SRH coordination meetings to discuss any accessibility issues adolescents and youth are experiencing based on consultations with young people; for example, these could include proposing using more adolescent-friendly language or visuals in SRH information materials or raising concerns about privacy and confidentiality of young people at health clinics.
Advocate with Health Cluster to ensure adolescents' SRH needs are included in rapid needs assessments	YLOs can review needs assessment tools to ensure adolescent data points are captured and advise on or facilitate consultations with adolescents using appropriate data collection methods.

Objective 1 Continued:

Map ASRH stakeholders and services and share information among SRH partners to avoid duplication of services and ensure SRH coverage for all adolescent populations

YLOs can contribute information on adolescent SRH stakeholders and services to include in the mapping exercise and share the mapping tool and results with their networks (see the ASRH Toolkit for a [service mapping tool](#) your YLO can use from Women's Refugee Commission).

Strategize with community members and/or adolescents and youth organizations and networks on communication channels to reach adolescents at onset of emergencies

YLOs can share their knowledge and experience with the best ways to reach young people in their community, particularly if certain modes of communication are preferred over others, and, when possible, advocate for implementing and/or partnering with other organizations to conduct outreach strategies to reach young people in the affected areas of the response.

Objective 2: Prevent sexual violence and respond to the needs of survivors

Adolescent-Inclusive Activities

Application to YLOs

Develop close coordination with child protection to ensure needs of sexual violence survivors, including adolescent boy survivors, are recognized and adequately responded to

YLOs should educate themselves on the child protection services available in their community to best be able to provide accurate information to young people and refer, when necessary.

YLOs can reach out to other youth-serving organizations in the Health Cluster and/or SRH/GBV SWG to find out more about the child protection programming they do; if that youth-serving organization does not have any child protection programming, they can signpost you to organizations doing this work to help facilitate coordination.

Provide adolescents with information about what SRH services are available and where they can be accessed

YLOs are often already doing this as part of their programming! During coordination meetings, YLOs can share how they are providing adolescents and youth information about where SRH services are, share lessons learned, and coordinate with other youth-serving organizations to avoid duplication and ensure all young people are receiving SRH information.

Engage community health workers (CHWs) to link adolescent survivors of sexual violence to SRH and health services

Many YLOs already have relationships with CHWs; however, if your YLO does not engage with CHWs, you can ask another youth-serving organization for support in understanding the network of CHWs (or other health volunteer structures in your community) and assistance with meeting CHWs to establish a relationship; YLOs can provide orientations to CHWs, who may or may not have an understanding of the unique needs of adolescents and youth in the community.

Provide adolescent-friendly care and safe abortion services (if desired) for adolescent survivors of sexual violence at health facilities

YLOs should follow local laws regarding safe abortion care; if your organization is unsure how to educate about or implement safe abortion care services, YLOs should seek out assistance from other youth-serving organizations (see the [Promoting self-care initiatives sub-section in Chapter 2](#) for more information on how YLOs can support safe abortion care through self-care initiatives)

Objective 3: Prevent the transmission of and reduce the morbidity and mortality due to HIV and other STIs

Adolescent-Inclusive Activities

Application to YLOs

Provide adolescents with information about what STI services are available and where they can be accessed

Promote the use of dual protection methods (prevention of pregnancy and prevention of STIs, including HIV) for adolescents

YLOs are often already doing this as part of their programming! During coordination meetings, YLOs can share how they are educating adolescents and youth about STI services and prevention and treatment methods, share lessons learned, and coordinate with other youth-serving organizations to avoid duplication and ensure all young people are receiving SRH information.

Ensure adolescents have continued access to antiretroviral therapy (ART) and provide post-exposure prophylaxis (PEP) to adolescent survivors of sexual violence as appropriate and for occupational exposure

Ensure ART adherence support activities are available for adolescents

YLOs should ensure their staff understands where ART and PEP commodities are available to provide accurate information to adolescents and youth in their area.

YLOs can also coordinate and/or partner with other youth-serving organizations to implement STI programming.

Ensure that adolescent-friendly health services are available for adolescents presenting to facilities with symptoms of STI

YLOs can raise concerns of adolescents and youth seeking STI services in their area during coordination meetings and, if needed, advocate for facilitating education and training sessions with health providers on providing adolescent-friendly services.

Objective 4: Prevent excess maternal and newborn morbidity and mortality

Adolescent-Inclusive Activities

Application to YLOs

Encourage facility-based delivery for all pregnant adolescents and provide them with information about what SRH services are available and when and where they can be accessed

YLOs should understand which facilities provide the delivery services and what kind of delivery complications that each facility is equipped to handle; for example, some health facilities cannot perform c-section surgeries and must refer those cases to higher-level facilities/hospitals.

YLOs should include messaging on the benefits and safety of delivering a baby in a health facility to adolescents and youth in their area; if young people are not delivering at health facilities, YLOs can gather information from young people on their concerns and raise those issues at coordination meetings.

Clean delivery kits should be provided to visibly pregnant adolescents, as well as to birth attendants to promote clean home deliveries when access to a health facility is not possible

For adolescents and youth who cannot go to a facility or do not want to go to a facility, YLOs should respect their decisions and be prepared to provide them with clean delivery kits or refer them to organizations who can.

YLOs can speak up at coordination meetings to provide reasons for why some adolescents and youth in their area prefer to deliver at home and, if needed, advocate for increased and/or more targeted outreach strategies to ensure all pregnant adolescent girls are receiving clean delivery kits.

Objective 4 Continued:

Raise community awareness about the risks of adolescent pregnancy, danger signs in pregnancy, and the importance of skilled birth attendants and facility-based delivery for adolescent mothers

Provide pregnant adolescents with information about what SRH services are available and when and where they can be accessed

YLOs are often already doing this as part of their programming! During coordination meetings, YLOs can share how they are educating adolescents and youth about maternal and newborn health services, share lessons learned, and coordinate with other youth-serving organizations to avoid duplication and ensure all young people are receiving SRH information.

Engage trained birth attendants (TBAs) and CHWs to link pregnant adolescents and mothers to health services

Engage TBAs and CHWs to link pregnant adolescents to health services

Many YLOs already have relationships with TBAs and CHWs; however, if your YLO does not engage with TBAs, you can ask another youth-serving organization for support in understanding the network of TBAs (or other health volunteer structures in your community) and assistance with meeting the TBAs to establish a relationship; YLOs can provide orientations to TBAs, who may or may not have an understanding of the unique needs of adolescents and youth in the community.

Objective 5: Prevent unintended pregnancies

Adolescent-Inclusive Activities

Emphasize that all contraceptive methods, including long-acting reversible contraception (LARC) methods, are safe and effective for adolescents

Ensure service providers are fully aware of local policies to offer adolescents a full range of contraceptive methods to the full extent of the law

Health staff should be aware that adolescents requesting contraceptives have a right to receive these services, regardless of age or marital status, in accordance with local laws and policies

Application to YLOs

YLOs should ensure their staff are familiar with the full range of contraceptive methods available to adolescents, including their safety and side effects. They should also understand the local laws and policies regarding provision of contraception to adolescents, such as assent and consent. If unsure, YLOs should seek guidance from other youth-serving organizations implementing SRH programming in their area.

YLOs can provide orientations and/or trainings to health staff on adolescent-friendly services and can even be a part of some facility operations (see [Supporting facility-based services sub-section of Chapter 2](#) for more information).

Promote the use of dual protection methods (prevention of pregnancy and prevention of STIs, including HIV) for adolescents.

YLOs are often already doing this as part of their programming! During coordination meetings, YLOs can share how they are providing adolescents and youth with information on dual protection methods, share lessons learned, and coordinate with other youth-serving organizations to avoid duplication and ensure all young people are receiving SRH information.

Objective 6: Plan for comprehensive SRH services, integrated into primary health care as soon as possible

Adolescent-Inclusive Activities

Application to YLOs

Identify SRH needs, including the needs of adolescents and youth, particularly those from sub-groups that are at increased risk and with unique SRH needs (such as adolescents living with HIV)

YLOs can conduct assessments and interviews to understand the needs of adolescents and youth in their community and/or partner with other youth-serving organizations to implement these initiatives.

Recognize the importance of privacy and confidentiality for adolescents when identifying sites for SRH service delivery

YLOs can support orientations and/or trainings with youth-serving organizations, health staff, and other humanitarian staff to emphasize the importance of privacy and confidentiality for adolescents, among other concerns identified by young people (see [Providing adolescent- and youth-friendly services subsection of Chapter 1](#) for more information).

YLOs should also be examining their own staff biases and attitudes towards provision of SRH services to adolescents and youth and, when needed, conduct exercises to open perspectives and enhance attitudes towards provision of holistic and responsive ASRH services (see [Supporting facility-based services in Chapter 2](#) for more information on these exercises).

Assess staff capacities to counsel and provide SRH services and information to adolescents and youth (e.g. contraception, safe abortion care, and clinical management of rape)

YLOs can provide orientations and/or trainings to health staff on adolescent-friendly services and can even be a part of some facility operations, such as data collection (see [Supporting facility-based services sub-section of Chapter 2](#) for more information).

YLOs can design their ASRH programs to disaggregate data by age and gender from the start of implementing their activities (see [Chapter 5: Data for Impact](#) for more information).

Identify staffing needs and levels including observing staff attitudes and biases toward providing SRH services and information to adolescents

If possible/feasible, hire male and female staff with appropriate skills and experience to allow patients to choose their preferred provider

Advocate for and identify approaches to integrate age- and gender-disaggregation of data

Objective 6 Continued:

Examine SRH commodity needs of adolescents to better anticipate stock shortages and ensure availability of commodities for crisis-affected adolescents [e.g. antiretroviral (ARV) medications, clean delivery kits, and safe abortion care commodities]

YLOs can raise concerns from young people at SRH coordination meetings about the lack of commodities at certain facilities to inform the supply chain management of SRH commodities for young people.

Begin discussions with adolescent/youth organizations to understand financial barriers and opportunities

This is you! Speak up at coordination calls to help youth-serving organizations understand your barriers to operating in humanitarian settings and where you need support, as well as areas for future partnership.

Examine how perceptions of SRH services for adolescents affect providers' ability/delivery of SRH services for adolescents

YLOs can conduct assessments to understand perceptions of SRH services from adolescents and share those results at SRH coordination meetings.

Begin discussions with Ministry of Health (MOH) on adolescent strategies

YLOs can advocate for a seat at the table when other youth-serving organizations schedule meetings with the MOH and/or YLOs can speak up during Health Cluster meetings to offer their contributions to adolescent strategies; often, the MOH is one of the co-leads of the Health Cluster during a response.

Discuss opportunities to bring adolescents/youth and community members together to talk about SRH needs, barriers, and opportunities for adolescents to receive the services they need

YLOs can offer ideas on mobilization and outreach activities, as well as open platforms for community members (including adolescents and youth) to come and speak to SRH organizations; this could be at coordination meetings or other events and opportunities.

Other Priority Activities: Safe abortion care

Adolescent-Inclusive Activities

Application to YLOs

Ensure at least one trained provider is available to provide adolescents with counseling and safe abortion care services with at least one method recommended by the World Health Organization (WHO), as well as being able to provide post-abortion contraceptive services to adolescents

Safe abortion care should be provided to adolescents in accordance with local laws, and providers should not impose additional barriers for adolescents to access safe abortion care

YLOs should understand local laws and policies regarding provision of safe abortion care, particularly to adolescents—whom often have different regulations and restrictions for access to these services, if available. YLOs should also understand where safe abortion services are available for adolescents and be prepared to refer young people to those organizations/facilities, when needed.

If unsure of where to go for accurate information, request assistance from other youth-serving organizations within coordination meetings or other work your organization is doing in your community.

Engage TBAs, CHWs, and adolescent champions to link adolescents seeking abortion services to the health facility

Many YLOs already have relationships with CHWs and/or TBAs; however, if your YLO does not engage with TBAs or CHWs, you can ask another youth-serving organization for support in understanding the network of CHWs/TBAs (or other health volunteer structures in your community) and assistance with meeting the CHWs/TBAs to establish a relationship; YLOs can provide orientations to CHWs/TBAs, who may or may not have an understanding of the unique needs of adolescents and youth in the community.

Inform community leaders and adolescents regarding the availability of safe abortion services for young women and adolescent girls

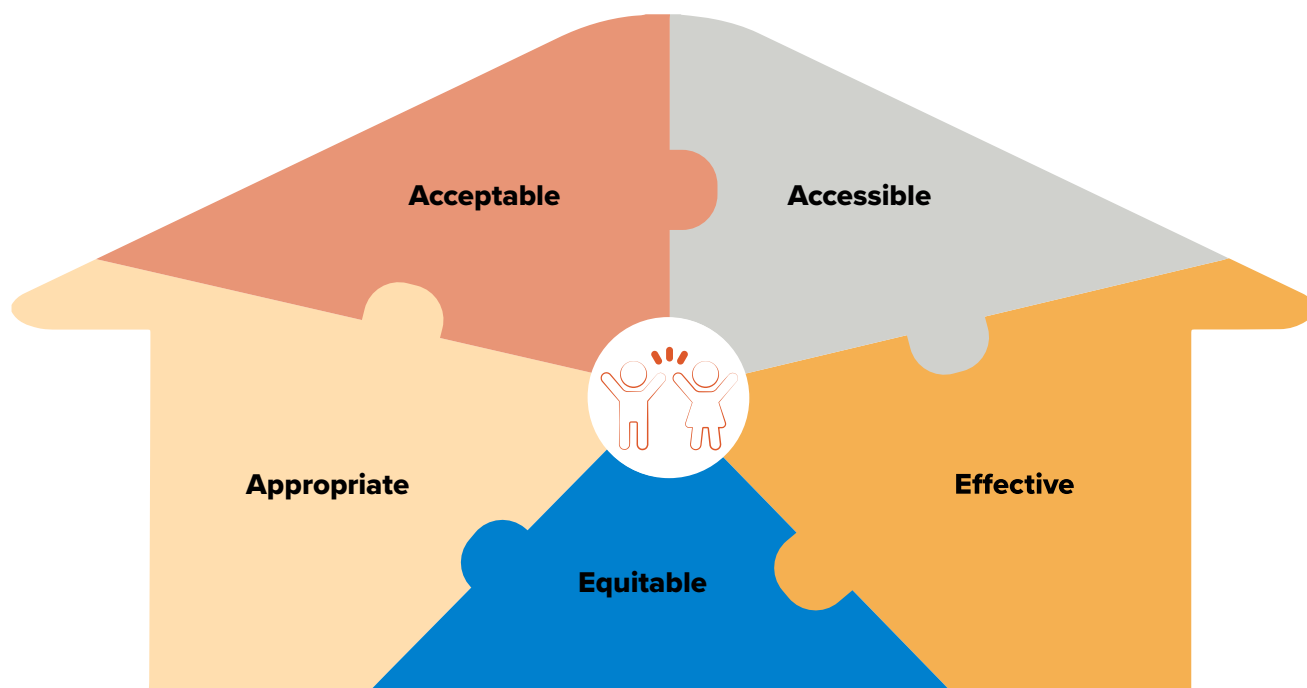
Conduct outreach activities and distribute information, education, and communication (IEC) materials that outline the national laws and policies related to safe abortion care and consent for adolescents

YLOs are often already doing this as part of their programming! During coordination meetings, YLOs can share how they are providing adolescents and youth with information on safe abortion care, share lessons learned with working with community leaders, and coordinate with other youth-serving organizations to avoid duplication and ensure all young people are receiving SRH information. For those not working in safe abortion care, YLOs can work with other youth-serving partners to implement outreach strategies to increase coverage of IEC materials to young people.

Providing adolescent- and youth-friendly services

Adolescent- and youth-friendly health services are designed to provide young people with the information, tools, and support they need to make informed decisions about their health and well-being, and to promote healthy behaviors and lifestyles, which can be more challenging in humanitarian settings. In accordance with [WHO's guidance](#), the ASRH Toolkit outlines five key principles to achieve this: services should be accessible, acceptable, appropriate, effective, and equitable for adolescents and youth. The ASRH Toolkit designed a figure to help visualize how these principles work together, with the adolescent's needs, preferences, and characteristics at the center of all ASRH service provision (see Figure F). Below the figure, the guide has summarized the five principles. For more information on how these principles apply to humanitarian settings, please consult [Table 5 of the ASRH Toolkit](#).

Figure F: Principles of Adolescent-Friendly Services



Accessible

All adolescents and youth should be able to obtain the health services that are provided. For example, they should be able to receive health services free of charge or be available at a price that is affordable to them. Health services should be available to all adolescents

and youth during convenient hours, for example after or before school or work and during weekends and holidays, where applicable. Adolescents and youth should be aware of what health services are being provided, where and when they are provided, and how to obtain them. They should receive correct information about their eligibility to receive services, including if and when parental and/or spousal consent may be required. The location of the facility should be such that young people find it easily and are comfortable getting there.

Acceptable

Health services should be provided in ways that meet the diverse expectations of adolescent and youth clients. Policies and procedures should be in place to maintain confidential and non-stigmatizing care that respects young people's rights to privacy, autonomy, and informed decision-making. Service providers should be non-judgmental, considerate, and easy to relate to, and should provide services to the fullest extent of the law and of their competencies. Adolescents should not be denied services based on the attitudes, beliefs, or preferences of health providers. Information that is relevant to the health of adolescents and youth should be available in a variety of channels and formats suited to young people. Materials should be presented in a familiar language, easy to understand, eye-catching, and responsive to different disabilities and other needs. Service environments should be tailored to reflect cultural nuances, norms, and preferences—to create a welcoming and clean environment where young people feel safe, respected, and understood.

Appropriate

SRH services that adolescents and youth need should be provided in an age-appropriate way. These services may include SRH counseling and support, screening and diagnosis, health education and promotion, and treatment and referral. Not every facility in a humanitarian context will be able to provide the full package of services from the beginning of the emergency, which is why strong referral systems and interagency coordination are necessary. More information on referrals is available in [Chapter 2](#). The ASRH Toolkit includes examples of [referral forms](#) for the client, referring agency, and receiving agency, as well as the WHO health service referral form.

Effective

Young people are more likely to seek services at a facility if they are confident the services they require will be available. Services must be delivered using evidence-based guidelines, with the necessary equipment and supplies. Healthcare providers and support staff should be trained on the relevant clinical and counselling competencies, as well as the

interpersonal skills required to deliver quality SRH services to young people. Healthcare providers should also have sufficient time to effectively meet adolescents' needs, including building trust and answering questions.

It is important to regularly evaluate the effectiveness of youth-friendly services and adjust as needed. This may involve gathering feedback from young people, tracking service utilization rates, and using data and recommendations from young people to inform decision-making and programmatic improvements. [Chapter 5](#) includes more details on monitoring and reviewing data.

Equitable

All adolescents and youth should be able to obtain the health services they need, without discrimination of any form. Adolescents and youth must be treated with equal care and respect, regardless of their age, gender, marital or social status, ethnic origin, disability, or any other characteristics that may put them at a disadvantage.

Adopting a holistic lens in ASRH programming

The needs of adolescents in humanitarian settings are multi-sectoral and complex, so it is important to approach ASRH activities with a holistic lens. This means looking at the needs of the whole person, including how other economic, food security, education, or other needs impact their SRH. This often goes beyond ASRH services and requires engagement with other sectors and partners, such as health, protection, education, and psychosocial services, as well as livelihood opportunities. In addition, as discussed earlier with the [Social-Ecological Model](#), adolescents are affected by relationships, communities and their culture, as well as the health system, coordination of humanitarian activities, physical environment, and other structural components. Thus, when coordinating with other sector staff and/or partners, YLOs should ensure their activities are examining these factors as well to best address the holistic needs of adolescents and youth in their area. Planning a coordinated response that aims to address the diverse and multi-sectoral needs of young people is crucial to the success of a response, and YLOs are well-positioned to highlight this inter-connectedness.

IAWG developed a multi-sectoral tool that identifies ways to integrate ASRH activities across all humanitarian sectors. The guide has adapted this tool for YLOs. This tool also includes questions to guide conversations about ASRH opportunities with members of your organization or other organizations that do not work in health programming. See [Annex B](#) to access the tool.



Photo: Save the Children, Dhaka

CHAPTER 2: SUPPORTING ASRH SERVICES IN HUMANITARIAN SETTINGS



Overview and key points

This chapter outlines the important roles that YLOs can play in strengthening ASRH services across the humanitarian continuum, both for facility- and community-based programs, and the links between the two. A combination of these activities can be used together as part of a comprehensive YLO ASRH program. The sections in this chapter include:

- Implementing community-based programs
- Supporting facility-based services
- Ensuring referrals from community to facility services
- Promoting self-care initiatives

The key points from this chapter include:

- YLO are often best placed to deliver effective community-based ASRH programs. These can include collaboration with community health and outreach interventions; IEC activities; and engaging young people as first responders.
- YLOs can advise health facility staff directly and facilitate consultations with adolescents to help ensure the facility set-up, staffing, and communications are adolescent and youth friendly.
- Referrals from community to facility services are vital for ensuring that young people can access comprehensive, timely, and continuous SRH services, even during a crisis. YLOs have an important role to play in ensuring referral mechanisms are established, functional, and responsive to adolescents and youth.
- Young people may prefer self-care SRH approaches, especially in humanitarian settings where infrastructure, services, supplies, and health staff are often constrained. YLOs can help promote self-care among their networks of young people and advocate to make it a priority for young people in crisis.

Implementing community-based programs

YLOs are uniquely positioned to help design and implement effective community-based ASRH programs because they usually have the best understanding of the context adolescents are living in. In humanitarian settings, YLO and community-based organizations also typically have better access to affected people and can begin implementation quicker due to established trust and reputation within the community. Building that trust could take longer for international organizations, particularly those who have not worked in that area before, resulting in lost time in providing life-saving assistance to those in need.

YLOs can implement a range of community-based activities for ASRH:



• **Community mapping and co-creation:** YLOs can use community mapping tools to identify the specific ASRH needs, resources, and assets within their communities before, during, and after a crisis. This knowledge enables them to co-create solutions with community members and stakeholders—fostering a sense of ownership and sustainability. Community mapping also helps identify potential partners and allies, enhancing collaboration and resource mobilization. The ASRH Toolkit has a tool YLOs can use for [mapping SRH services](#).



• **Outreach and community health:** Health facilities often routinely offer specific SRH services at the community level, even in crisis settings. These can include SRH outreach campaigns with TBAs, CHWs, or other community mobilizers. YLOs can collaborate with CHWs—co-organizing a schedule of outreach activities for young people at times and places that are convenient to them and support the dissemination of information about the services being provided.



• **Creation, procurement, and dissemination of IEC materials:** YLOs can use IEC tools at the community level to share important SRH messages with young people. Information should be evidence-based, appropriate (thinking about age, language, and other characteristics of target population), and in accordance with the country's health system / MOH policies and guidance materials. In addition, the tools should be communicated using attention grabbing and appropriate approaches, matched to the preferences of young people. Some tips for creating IEC materials for young people:

- IEC tools may include visual, audio, virtual, or in-person approaches, such as memes, cartoons, catchy jingles, posters, songs, and dances.
- It is important to consider which channels are accessible in emergency settings, and the most effective existing structures for awareness campaigns. For example, in some emergencies, radio is more accessible and effective compared to cell phones, which might not be available for crisis-affected populations in your area.



• **Engaging young people as first responders:** Young people are capable of contributing to all levels of the humanitarian response framework, in addition to their communities. This engagement can look different depending on your organization and the context you are working in. Organizations use all kinds of terms for their engagement with young people (youth volunteer, peer educator, peer provider), along with associated approaches, toolkits, and training guides. It is important that regardless of what way your organization works with young people that you understand ethical considerations and best practices of engaging young people as first responders.

- Please refer to [Meaningful and ethical participation](#) subsection of Chapter 3 of the guide for more details.

The ASRH Toolkit also includes more detailed information on using [communications, media and technology](#), [engaging adolescents and youth as first responders](#), and [community health](#).

Supporting facility-based services

YLOs are well positioned to actively support and strengthen facility-based ASRH services in a number of ways. The different activities outlined below can be included in YLO projects and programs in humanitarian settings.



- **Facility site set-up and design:**

support the design and/or renovation of health facility to ensure it is adolescent and youth friendly, facilitate consultations with adolescents to identify suitable locations for facilities and their preferred communication channels to request information or other services, and conduct assessment of existing facilities to enhance the quality and responsiveness of facility to adolescent and youth SRH needs. YLO staff can also work as staff or extension staff of the facility, ensuring they have the right expertise and training. For example, in some humanitarian contexts, facilities have hired young people to be peer providers, where the young staff person greets and provides SRH information to young people entering the facility to make them feel more comfortable. In some circumstances, youth staff can provide some counseling services, with adequate training and supervision support.

- The ASRH Toolkit provides a [checklist](#) to use when setting up a facility and/or monitoring SRH services at an existing facility to ensure the SRH services provided are adolescent and youth friendly. YLOs can use this checklist as part of design setup or monitoring assessments.



- **Recruitment and training of health staff:** co-develop and review job advertisements, and/or support orientations or clinical training for healthcare workers and support staff to ensure staff have the characteristics and skills that are important to young people. YLOs can advocate for being co-facilitators with MOH or UNFPA when they are training new staff or providing refresher trainings. Beyond trainings, YLOs can facilitate and/or co-facilitate Values Clarification and Attitudes Transformation (VCAT) exercises. VCAT exercises can be used with a range of stakeholders in various training formats and meetings to help participants explore, questions, clarify, and affirm their values and beliefs about adolescents and SRH issues.

CASE STUDY: ENGAGING YOUNG PEOPLE THROUGH THE PEER PROVIDER MODEL

Shining Hope for Communities, with support from the Planned Parenthood Federation of America, implemented an approach to strengthen and increase awareness about SRH by empowering youth to deliver these messages. Using a Youth Peer Provider (YPP) model, Shining Hope for Communities trains young people to provide ASRH services and information to their peers. The YPP model has been implemented in various humanitarian contexts and has been shown to increase the uptake of ASRH services and improve health outcomes for young people. By using the YPP model, organizations can leverage the expertise and knowledge of young people to effectively promote ASRH in humanitarian settings. The YPP model also provides an opportunity for young people to develop valuable skills and leadership experience, empowering them to become agents of change in their communities. For more information about Shining Hope for Communities' work, see their [webpage](#).



- The ASRH Toolkit provides many resources for training your own staff and/or healthcare workers on how to provide adolescent- and youth-friendly SRH services. These include overall [training guidance](#), [training slidedecks](#), an [ASRHR coordinator job description](#), an [onboarding plan](#), and a [sample VCAT exercise](#) for ASRH.
- Additionally, ARROW has developed a training and workshop on VCAT on the topic of [intersectionality and sexuality](#) to enable young people to become effective advocates for social change surrounding adolescents' and youth's SRHR.



- **Creation, procurement, and dissemination of IEC materials:** advise on and review IEC materials to ensure they are age appropriate, relevant, and use language that adolescents can easily understand. For example, eye-catching posters and pamphlets can be downloaded from government, WHO, IAWG, or UNFPA websites; these materials can be displayed in healthcare facilities to convey important messages about puberty, menstruation, contraception, STIs, consent, healthy relationships, and other relevant issues. For more information on using adolescent-friendly language, see the [Five Principles for Creating a Trustful Atmosphere for Adolescent Counseling](#) in the ASRH Toolkit.



- **Adolescent committees and feedback mechanisms:** establish and facilitate adolescent committees affiliated with health centers to act as an advisory and consultative group. YLOs can also lead and/or support establishment of feedback mechanisms for adolescents and youth; for existing mechanisms, YLOs can consult with adolescents and youth to ensure the mechanisms are functional and responsive to adolescent and youth needs.

Ensuring referrals from community to facility services

The disruption of health systems and services in humanitarian settings requires an effective referral system to ensure young people receive comprehensive, timely, and continuous SRH services no matter what circumstances they are facing. Health service referral is when a health worker at one level of the health system requests assistance from a different level of the health system due to insufficient resources or skills. Referrals also serve as a gateway to other vital support services, including psychosocial support, GBV counselling, and legal assistance, among others. YLOs can support these linkages between community- and facility-based care, as well as other service providers. YLOs are well positioned to support referrals, given their trusted reputation and relationships with young people—who often feel more comfortable seeking counsel from people their own age before approaching individuals from other organizations.

Considerations for safe and confidential referral include:



- **Training:** everyone involved in referral pathways should be trained on how to provide a referral, including in an emergency, as well as handling disclosure of GBV cases.



- **Information about services:** everyone involved in referral pathways needs to have the latest knowledge on services available (including who provides those services, stock outs, dates and times of outreach, etc.) and what services are not available in your area; referring an adolescent or youth to a service that is not available at that moment could cause lack of trust, in addition to not meeting their SRH needs.



- **Funding:** a contingency fund to support emergency transport should be discussed with other humanitarian organizations, as lack of funds for transport is a common barrier to services for young people.

With the frequent changes in humanitarian conditions, including staff turnover and the presence of new or different organizations, referral pathways should be revisited throughout the humanitarian continuum to ensure they are functional and viable.

The ASRH Toolkit includes examples of referral forms for the [client](#), [referring agency](#), and [receiving agency](#), as well as the [WHO health service referral form](#). It is important that the client, referring agency, and receiving agency all have copies of the referral form to ensure each agency, as well as the client themselves, understands the requested services and can follow-up appropriately if the referral has not taken place. The ASRH Toolkit also provides information on [other health service delivery options](#) such as telemedicine, and mobile health clinics and teams.

Promoting self-care initiatives

WHO defines self-care as “the ability of individuals, families, and communities to promote health, prevent disease, maintain health, and cope with illness and disability with or without the support of a healthcare provider”. Adolescents may prefer self-care approaches for privacy and to avoid stigma associated with SRH. Self-care is especially relevant in humanitarian settings where young people are exposed to violence and there may be limited infrastructure, services, supplies, and health staff. Instances where self-care has proven effective and could be helpful in humanitarian settings include abortion, contraception, and HIV self-testing services, among others.

Examples of YLO support to self-care initiatives:



- **Encourage** and motivate young people in YLO networks to utilize self-care options available in their community. This requires YLOs to have up-to-date information on what options are available, where, and any restrictions placed on adolescents using these services.



- Work with **health facilities** to provide young people with the information, support, resources, and equipment to empower them to make informed decisions and take control of their health. For example, YLOs could provide outreach strategies on self-care options for young people that is linked with what the health facility and community is able to offer.



- **Refer** young people to available facility services, staff, or other organizations to facilitate self-care, including private organizations (if appropriate).



- **Advocate** to make self-care a priority for young people in crisis. This is particularly important in emergency situations, where the importance and urgency of ASRH programs may need to be emphasized in the face of competing health priorities.

- **For more resources:** See IAWG and IRC’s [report](#) on barriers, opportunities, and lessons learned with self-care initiatives, as well as [SSHINE Lab’s advocacy video](#) on self-care.



Photo: Save the Children

CHAPTER 3: MOBILIZING AND SUSTAINING ENGAGEMENT



Overview and key points

Youth engagement is a critical component of effective ASRH programming in humanitarian settings. For YLOs, this engagement is central to your mission and how your organization functions. Remaining youth led as an organization presents unique challenges for YLOs, such as maintaining youth leadership and “aging out”. These challenges, along with others that all organizations face in meaningfully engaging young people and sustaining their participation, are described in this chapter, as well as approaches and best practices to address these concerns. The specific sections in this chapter include:

- **Building youth engagement and cohesion:** this subsection provides a brief refresher of the importance of engaging young people in humanitarian programming, as well as some case studies of how YLOs have mobilized adolescents and youth in their emergency settings.
- **Meaningful and ethical participation:** this subsection describes how YLOs can meaningfully engage young people in their activities, including ethical guidelines and best practices from the ASRH Toolkit, tailored for YLOs.
- **Ensuring sustainability:** this subsection discusses some of the unique challenges facing YLOs with maintaining their youth-led focus and provides recommendations and case studies on how YLOs can address them.

The key points from this chapter include:

- Young people are pivotal actors in humanitarian preparedness, response, and recovery, especially for issues such as ASRH that directly affect them. YLOs are critical actors in ensuring young people are meaningfully engaged in humanitarian coordination and implementation.
- Young people can be mobilized through collaboration between YLOs, Ministry of Health, community-based organizations, and other agencies serving young people using community youth centers, outreach events, faith and religious centers, humanitarian service delivery points, and other places young people gather.
- Young people should be engaged in a meaningful and ethical way throughout the program cycle (from assessment to design, implementation, and review), and across the emergency-to-development continuum (preparedness, response, and recovery)— not solely during the acute phase of an emergency. This includes utilizing appropriate channels for young people to report complaints or share feedback and ensuring their engagement is inclusive and culturally sensitive, recognizing their diversity.
- Sustaining engagement is essential but poses specific challenges. For example, YLOs face challenges relating to qualified staff and volunteers “aging out” of the age-groups of the YLO. Your organization can plan for this and identify other roles for former staff and volunteers to remain involved, while supporting new youth leaders.

Building youth engagement and cohesion

Adolescents and young people are often only involved in activities as program participants, and rarely as key stakeholders in the design, planning, implementation, and evaluation of interventions. YLOs understand well these challenges, not only because your organization is comprised of young people but also because your organization faces similar challenges when partnering with other youth-serving organizations, who sometimes only want to engage your YLO for a one-time advocacy event or for a short-term activity (see [Chapter 4: Equitable and Sustainable Partnerships](#) for more information). As YLOs know, engaging young people in the planning, implementation, and review of ASRH programs in humanitarian settings is not just the right thing to do, but essential—**adolescents and youth must be involved in the decisions that directly affect them**. There are a number of important reasons to provide young people with a platform to voice their opinions, ideas, and concerns, which are illustrated in Figure G.

Figure G: Young People Deserve a Platform!



To engage young people, YLOs must also involve gatekeepers or people who can enable or hinder young people's access to information and services. These can include parents, teachers, religious leaders, and other community members. YLOs can help bridge the gap between gatekeepers and young people. YLOs can offer creative ways to bring different groups together and respectfully discuss sensitive topics. YLOs can gather information from adolescents and youth to bring to discussions with other duty bearers, who may be more likely to listen to the demands of young people when their needs and preferences are presented with one voice/from a trusted YLO in the community. Engaging young people is not limited to only your communities, your YLO can advocate for adolescent or youth representatives in country or global platforms as well.

CASE STUDY: IAWG ASRHR SWG YOUNG PERSON CO-CHAIRS

Every year, the IAWG ASRHR SWG selects adolescent and young person representatives to serve as Young Person Co-Chairs (YPCCs) for the SWG. The terms of reference for this position was created by a group of young people and is regularly reviewed and adjusted based on feedback from young person co-chairs who have served in the role. The YPCCs, with support from the SWG co-leads, plan monthly coordination calls (agenda setting, taking notes, etc.) and implement action points from those calls. YPCCs are vital in championing young people's voices at monthly coordination meetings and regularly share updates on their important work. In addition to their role within the SWG, the IAWG ASRHR SWG also advocated for IAWG's leadership structure, the Steering Committee, to include a YPCC in their coordination calls, allowing the YPCCs to represent young people's views at higher levels of IAWG leadership as well. The co-chair role has also provided a foundation for further youth representation opportunities, such as the UN Major Group for Children and Youth, the formal mechanism for young people to meaningfully engage in the UN, among other leadership avenues.



Your YLO should make sure that any young person engaged in these meetings or events has adequate support and resources to contribute (see [How to Actively Participate in Coordination Meetings under Chapter 1](#) for more information). The IAWG ASRHR SWG provides a case study of how to engage adolescent and youth representatives in global arenas.

Meaningful and ethical participation

The ASRH Toolkit provides [guidance](#) on participation and engagement of young people in ASRH programs. This includes specific examples of who to engage, when and how, as well as a sample safeguarding policy. This guide highlights three key resources from the ASRH Toolkit and UN:

1. Flower of Participation
2. Ethical guidelines for meaningful participation
3. Best practices for engaging young people

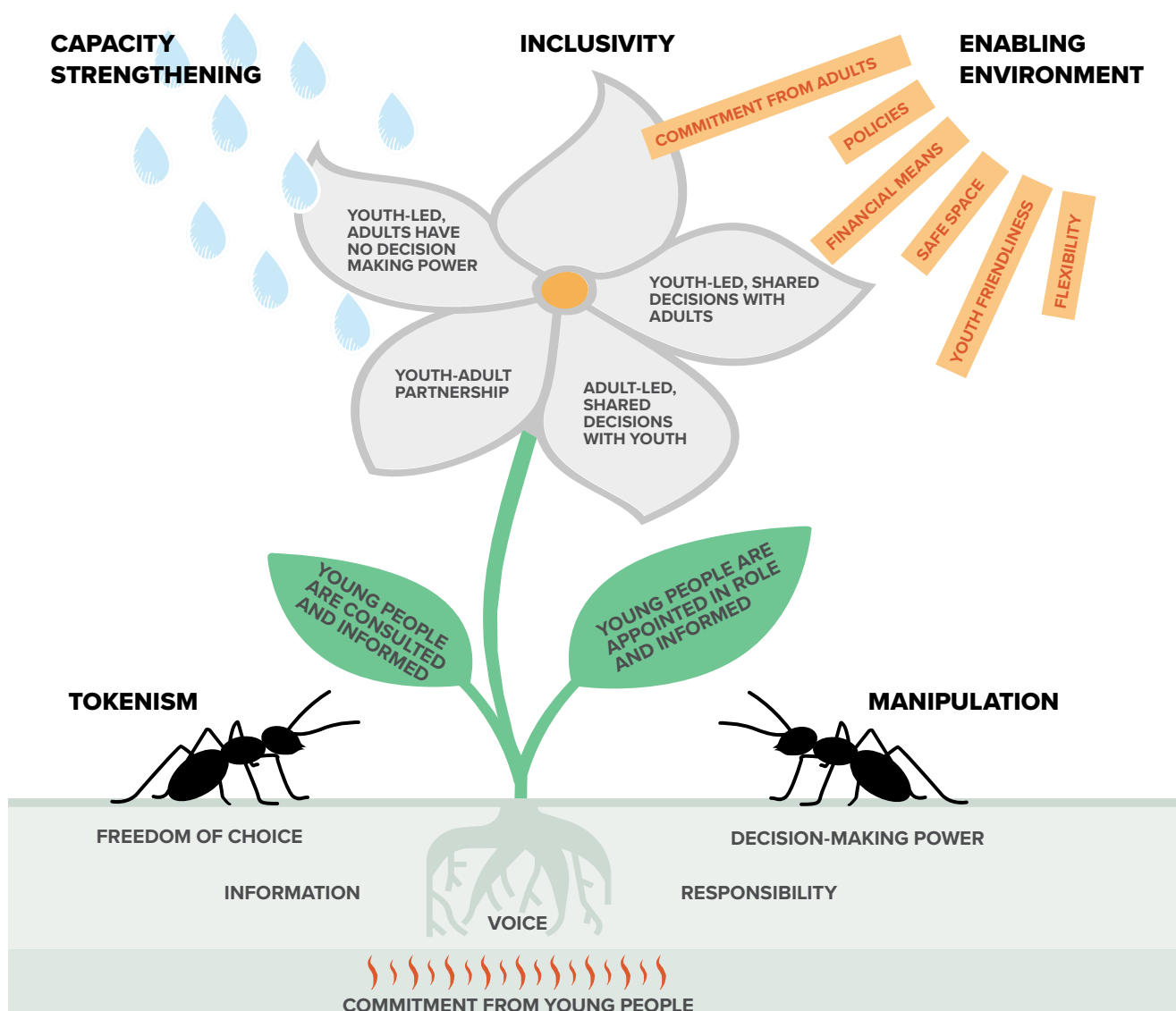


Photo: Mitafi, Cameroon

Flower of participation

The [Flower of Participation](#) is a resource developed by CHOICE for Youth and Sexuality and YouAct that uses the metaphor of a blooming flower to describe the various forms of meaningful participation with adolescents and youth, and the environment required to enable meaningful participation to thrive and flourish. This resource may be a helpful tool for your YLO to use when discussing meaningful participation with other youth-serving organizations to help illustrate the different forms of participation and whether they are meaningful or not. At the base of the graphic are the core elements of meaningful participation of young people (the roots). The leaves and petals show different forms of meaningful participation, with the leaves showing lower levels of participation compared to the examples on the petals. However, the insects illustrate non-meaningful forms of participation. The sun and water demonstrate requirements for meaningful participation to occur and be successful.

Figure H: The Flower of Participation



Ethical guidelines for meaningful participation

The [UN Committee on the Rights of the Child](#) outlines nine basic requirements for meaningful and ethical participation of adolescents and youths.

1. **Transparent and informative:**

Adolescents must receive full, accessible, diversity-sensitive and age-appropriate information.

2. **Voluntary:** Adolescents should never be coerced into expressing views against their wishes, and they should be informed that they can cease involvement at any stage.

3. **Respectful:** Adults should acknowledge, respect, and support adolescents' ideas, actions, and existing contributions.

4. **Relevant:** Adolescents should have opportunities to draw on their knowledge, skills, and abilities to express their views on issues that have real relevance to their lives.

5. **Adolescent-friendly:** Environments and working methods should consider and reflect adolescents' evolving capacities and interests.

6. **Inclusive:** Include marginalized adolescents of different ages, genders, (dis)abilities and backgrounds. YLOs should be respectful and in tune with local customs and traditions of their community, including ensuring that program materials are available in languages that are commonly used in the community and that reflect local values and norms.

7. **Supported by training:** Adults and adolescents should be trained and mentored in facilitating adolescent participation.

8. **Safe and sensitive to risk:** Expression of views may involve risks. Adolescents should participate in risk assessment and mitigation and know where to go for help if needed.

9. **Accountable:** Adolescents should receive clear feedback on how their participation has influenced outcomes and should be supported to share that feedback with their peers.

! COMPLAINTS & FEEDBACK

[Core Humanitarian Standard on Quality and Accountability](#) emphasizes that affected people should have access to safe, inclusive, and responsive means to report misconduct and complaints. This can help to build trust and promote empowerment, and is also a key component of safeguarding. YLOs should establish and advise other youth-serving organizations on appropriate reporting channels that align with the preferences of young people in their community, such as feedback forms, social media, or locked complaint boxes. All feedback and complaints should be acknowledged, managed, and responded to in a safe, timely, and appropriate way. Any issues that go beyond the responsibilities of that organization should be referred to a relevant party. Strong complaints and feedback mechanisms are a basic requirement for YLOs funded by international or donor organizations—without these in place, YLOs may be disqualified from partnerships.



Best practices for engaging young people

The ASRH Toolkit outlines a list of [best practices](#) for engaging young people, pasted within the guide below with adapted language for YLOs. These best practices apply both to the staff a part of your organization, as well as to the adolescents and youth you are serving and engaging as part of your ASRH program.

- ✓ Cross-check local human resource laws pertaining to adolescent engagement. If your organization does not have any policies regarding working with individuals aged 10-19 years old, the guide recommends consulting with other youth-serving organizations, who have human resource departments that align with country laws and policies.
- ✓ Make sure your YLO has a policy on engaging individuals under the age of 18 years. Issues such as how volunteers under the age of 18 years will be reimbursed through non-cash incentives, the maximum number of hours they are allowed to volunteer per day and per week, and the minimum supervision requirements in order to engage young people should be included as part of this policy. As well, issues of assent and consent should be included as part of this policy.
- ✓ Have clear selection criteria for the type of adolescents and youth your organization is engaging. Your YLO should try to engage adolescents and youth from the crisis-affected population, including those with increased needs, such as very young adolescents, adolescents with disabilities, etc. (see [Unique needs of adolescents, youth, and young people in humanitarian settings](#) under Chapter 1 for more information).
- ✓ Program managers should have clear selection criteria for adolescent and youth volunteers to ensure they are representative of the crisis-affected population and are able to reach those at increased risk (consider age, gender, in/out of school, marital status, cultural background, disability status, etc.).
- ✓ Ensure that youth volunteers are not given tasks or duties that will risk their lives, safety, or lead them to become stigmatized by their community.
- ✓ Young people often serve in their YLO roles as volunteers. To ensure engagement is as inclusive and equitable as possible, YLOs should try to offer appropriate remuneration for young people's time and efforts, being transparent about these from the outset. These could be financial or other incentives, such as awards that recognize young people's contributions or opportunities for personal or professional development.
- ✓ The terms of reference for engaging young people should be communicated not just with the volunteers but with all members of your YLO. If your youth volunteers or YLO staff are working with other youth-serving partners, the terms of reference for their positions should also be communicated to ensure volunteers and/or staff are not being burdened by tasks outside of their agreed-upon scope of work.
- ✓ Regardless of the stage of emergency, all youth volunteers should be properly onboarded to your YLO's ways of working, including undergoing orientation on child safeguarding, prevention of sexual exploitation and abuse, and how to report incidents.
- ✓ Young volunteers should understand that they can stop volunteering at any time.
- ✓ Young volunteers must receive adequate supervision and mentorship along with continuous capacity-building support (one-time trainings are not effective!).



Ensuring sustainability

Networks and skills

Meaningful engagement and empowerment of young people in tackling crises can help to strengthen the sustainability of initiatives. In the shorter term, adolescents and youths may be keen to recruit more peers, promoting the continuity of the club's or organization's activities. Youth participation also promotes transferable skills, such as critical thinking, problem-solving, communication, teamwork, and leadership. Such skill development is essential for empowering young individuals to become effective advocates for ASRH. These experiences can stimulate a passion among young people for becoming active agents of change, helping to build more resilient communities in the longer-term. Opportunities for skill development, as well as ideas for keeping young people engaged, should be prioritized from the start of your engagement with adolescents and youth. As with other organizations, maintaining motivation and passion for the work can become challenging, thus YLOs should be continuously thinking of professional development and ways to encourage young people to grow and offer their contributions to the organization and work they are doing.



Photo: Save the Children, Ethiopia

Addressing unique challenges to YLOs

YLOs face specific challenges for the continuity of their work. Below are some of the challenges, as well as proposed solutions and ideas to address these issues.

Challenge	Description	Ideas to Address Issues
Aging out	Qualified staff and volunteers will outgrow the age bracket of the club or organization, known as “aging out”. This can create issues when the founder or leader of the organization is no longer considered a youth.	YLOs can identify other roles for former staff or volunteers to remain involved (e.g. advisory or committee positions), and support the growth and development of new youth leaders.
Mobility of youth	Young people are also a mobile group, and individuals may move away from their area for employment or education opportunities, or experience changes in family or other responsibilities that may take time away from their humanitarian work.	YLOs can recruit multiple staff for key positions to share responsibility to ensure there is continuity of activities if someone needs to step away. There should also be a succession plan, so that once a staff member has “aged out” or wants a position with larger responsibilities, the organization has someone in place to take over once that person leaves.
Donor requirements of youth leader	Some YLOs find that the requirements of donor agencies and youth-serving organizations are outside of their youth’s expertise and choose to hire an older adult to lead their YLO, which can complicate the mission of the organization in remaining youth-led.	YLOs can push back to donors and insist on keeping the youth that they have in charge of their organization. If the donor/partner wants to see more specific SRH expertise, YLOs can request mentorship from the donor/partner to build the organization’s expertise and provide justification for the value add of your YLO in implementing the proposed work (see Chapter 4: Equitable and Sustainable Partnerships for more information on communicating your value-add).
Lack of organizations dedicated to ASRH mission	For some humanitarian contexts, there are limited ways for young people to lead activities that impact the SRH of young people. If there are YLOs in your area, they may not be implementing activities to increase access and use of SRH.	You as a youth could join a community-based organization or YLO (if one exists in your area) and advocate for inclusion of ASRH as part of the work that they do. If that is not an option, the guide does not recommend starting new organizations without considerable investment from multiple individuals and prior mapping of the area to ensure a new YLO is needed (and will be sustainable). For guidance on starting a youth-led SRH organization, please refer to the step-by-step guide signposted in the resource table.

CASE STUDY: SOLUTIONS TO 'AGING OUT' – THE MIFALI AMBASSADOR PROGRAM IN CAMEROON

Mifali is an adolescent-led movement in Cameroon that works with young people under the age of 19, supporting their active participation and safeguarding them from potential risks associated with engagement. The movement's core areas of focus are ASRHR, gender equality, and adolescent leadership. With a nationwide reach, Mifali recognizes the importance of diversity among its members, including varied skills, gender representation, and knowledge, to maximize engagement of young people.

Initially, Mifali consisted of a committee comprising five young people working collectively on their goals. However, as members transitioned out of adolescence, the movement faced challenges in maintaining continuity and alignment with its objectives. To address this issue and ensure long-term sustainability, Mifali introduced the Mifali Ambassador Program.

The Mifali Ambassador Program serves as a platform for former adolescent members to assume new roles as mentors and advisors to newly admitted members. This allows Mifali to retain the wisdom and experience of its former members, while providing an avenue for them to continue contributing to the movement's work and shaping its future. By channeling their expertise as mentors and advisors, former members help guide and inspire new members, ensuring a smooth transition and fostering a supportive environment for learning and growth.

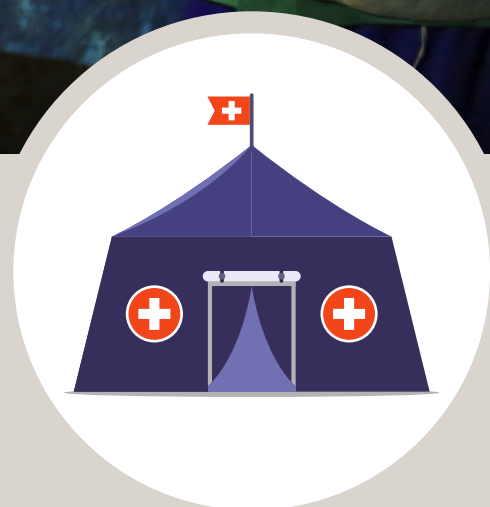
Mifali's innovative approach to youth participation and sustainability demonstrates its commitment to empowering young people and harnessing their potential. By leveraging the Mifali Ambassador Program, the movement reinforces its core values and objectives while nurturing a strong network of young leaders who continue to advocate for ASRHR, gender equality, and adolescent leadership across Cameroon.



Photo: Mifali, Cameroon



CHAPTER 4: EQUITABLE AND SUSTAINABLE PARTNERSHIPS



Overview and key points

YLOs encounter significant barriers that hinder their ability to engage meaningfully or lead activities in a humanitarian response. These include factors that are inherent in many YLOs, which is discussed further in [Chapter 6: Operating at High Quality](#), as well as factors from outside of the YLO—the topic of this chapter. This chapter focuses on the barriers YLOs face that are imposed by other agencies or the environment they are working in. This chapter delves into the principles and approaches that underpin equitable and sustainable partnerships in humanitarian systems, highlighting the challenges and potential solutions for YLOs in advocating for these more inclusive and equal collaborations. The specific sections in this chapter include:

- Communicating the value-add of YLOs: this section provides advice, tools, and tips for how to justify inclusion of YLOs in humanitarian activities
- Principles of equitable and sustainable partnerships: this section outlines what YLOs can demand when forming or renegotiating partnerships with youth-serving organizations and donors
- Advice, tips, and resources for negotiating partnerships: this section provides a checklist of advice and tips, as well as additional resources YLOs can use when exploring partnerships

The key points from this chapter include:

- Communicating your value-add as a YLO is a critical first step in working with donors and youth-serving organizations.
- YLOs can utilize global youth models of partnerships to advocate for equitable and sustainable partnerships with donors and youth-serving organizations, which include several key principles, recommended actions, and advice and tips YLOs can use when negotiating for respectful and fair collaborations.
- Partnership should include efforts to build organizational, management, leadership, and technical capacities over a sustained period.

Communicating your value-add as a YLO

YLOs are valuable and critical agents of advocacy, implementation, and accountability for young people during a humanitarian response. The guide provides several contributions of YLOs to a humanitarian response. YLOs can use the below value-adds when communicating with donors and youth-serving partners as justifications for inclusion, partnership, and leadership opportunities. This could include justifying why your YLO deserves to be at a coordination meeting, why your YLO should be a key partner in implementation, or why your YLO should be actively involved in different aspects of SRH activities for adolescents and youth in your emergency context. See the next page for a one-pager on some of the reasons why YLOs should be actively engaged in SRH in emergencies activities.

Value-Add of YLO Partners in Humanitarian Response Activities

YLOs are poised to provide the voice and perspectives of young people, as well as implement and lead activities, in an emergency setting.

- YLOs can engage adolescents and youth quickly and effectively due to their strong reputation and relationships with young people and the community. This includes outreach to subgroups of young people that might be difficult or harder to reach for international organizations or even some community-based organizations. YLOs ability to quickly reach and mobilize young people is particularly valuable in an emergency setting, when time is limited and needs are high.
- In being youth-led, YLOs can offer innovative approaches to reaching young people since they are in touch with what young people are using to communicate and how they want to be reached with SRH messaging.

YLOs provide accountability of donors and youth-serving organizations to young people.

- YLOs are often the most well-informed about successful approaches to adolescent-friendly service delivery and community involvement. YLOs can advocate for the unique needs of young people, facilitating and promoting their meaningful engagement.
- YLOs can serve a critical role in citizen-led accountability work, helping make sure government and humanitarian bodies are providing open, transparent, and effective mechanisms for adolescents and youth to provide feedback and have that feedback acted upon.
- YLOs can help to hold partners and youth-serving organizations to account on their commitments, for example, by highlighting delays or gaps they have identified at coordination meetings. Having an organization dedicated to the needs and preferences of young people is crucial in a humanitarian setting, where the importance and urgency of ASRH programs may be neglected in the face of competing health priorities.

Empowering YLOs strengthens young people and their communities—supporting localization efforts.

- By having YLOs lead activities, they are able to engage non-traditional actors in humanitarian settings, such as adolescents with disabilities and religious leaders.
- Providing more opportunities for YLOs to implement and lead activities builds young people's assets and skills within their communities. This includes enhancing YLO staff's communication and conflict resolutions skills, which allows young people to speak up during coordination meetings and events to better advocate for young people's needs.
- Enabling YLOs to be a part of response efforts benefits the broader health system by investing in local organizations, which can reduce the cost and need for international humanitarian support and strengthen the continuity of the humanitarian response.

Principles of equitable and sustainable partnerships for YLOs

Many YLOs have reported challenges in partnering with donors, international organizations, UN agencies, and other youth-serving organizations. Some YLOs report that their partners only build a relationship with them at the surface level and do not provide them with genuine opportunities for them to meaningfully contribute to the project, such as engaging YLOs for one-time events, having them appear in media events, and other tokenistic means of participation. Other YLOs talk about burdensome and confusing compliance and reporting requirements, restrictive funding (both in terms of the amount and the flexibility on how to spend funds), not respecting the terms of the contract (adding additional activities), and delays in contracting and receiving funds, among others. Overall, interviews from YLOs show a lack of trust from youth-serving partners in the capabilities of YLOs to do the required work.

Establishing a fair and respectful relationship from the start of the engagement between your YLO and a potential donor or partner is paramount to creating a successful and sustainable partnership. The guide has taken actions from the [We Trust You\(th\) Initiative's recommendations](#) and [CHOICE for Youth and Sexuality Toolkit](#) to develop the below list of principles for equitable and sustainable partnerships for YLOs, in addition to adding special considerations for YLOs working in humanitarian settings. These principles can help guide your discussions with donors and youth-serving partners when you begin discussions about forming a partnership. The donor or partner may not embody all of these principles, but may be able to work towards delivering on areas they are lacking. It is up to your organization to determine what principles and ways of working are reasonable and feasible for your organization and where to push for the youth-serving partner you are working with to do more to enhance the relationship.



Photo: Save the Children

1. Flexible

- a. Funding mechanisms are flexible and there is trust and simple due diligence processes. This is particularly important for humanitarian contexts, when the situation changes rapidly and is important for donors/partners to remain agile to provide YLOs with opportunities to provide innovative activities.
- b. Donors and youth-serving partners work with YLOs to determine the best means for reporting. This means the donor/partner takes into account the capacity of the YLO to help your organization identify their impact or allow your organization to use different reporting structures to show your impact, such as using annual reports instead of quarterly / monthly reporting. Donors should remain flexible for submitting these reports, particularly if internet and communications challenges arise due to changes in safety or humanitarian conditions.
- c. Donors enable proposal submissions in multiple languages, not just English.
- d. Donors have eligibility criteria that are attainable for young people, instead of criteria that limits their eligibility (such as being registered, previous funding, or years in existence).

HOW TO ASK FOR TRANSPARENT COMMUNICATIONS

Your YLO can ask the donor or partner to provide guidance on issues that you are unfamiliar with or have not encountered before.



2. Transparent

- a. Communications are transparent, allowing for YLOs to ask pertinent questions and have an exchange to shape the work.
- b. Rules and standards of productive communication are established and there is an effort to learn and speak in the same language.
- c. YLOs are able to connect and share experiences and feedback with donor or partner during and after the project.

3. Respectful

- a. YLOs are compensated fairly for their time and effort.
- b. YLOs are consulted in the design process of the project, including any capacity building needs and work, to co-create the activities and determine how their expertise can be utilized and their organization's needs can be met.
- c. Collaborations and collective action should be co-designed and rooted in the foundations of an ongoing partnership, promoting sustainable mechanisms of funding for YLOs.
- d. YLOs work is shared and recommended by the donor/partner so that they have access to more resources.
- e. YLOs are given opportunity to lead discussions and/or develop agendas for presentations, calls, and events.

4. Supportive

- a. The donor / partner builds a safe space in which your YLO's capacity will not be doubted for asking questions.
- b. The donor / partner provides core support and potentially additional funding or grant for resilience and wellbeing of your YLO. For example, your YLO and the donor have agreed that certain skills are needed for the proposed work and your YLO needs additional support to grow those skills; then, the donor could set aside additional funding to support development in those areas as part of the agreement with your organization.
- c. Donors and partners help make connections between YLOs and other donors and youth-serving partners to promote additional funding and networking opportunities.

HOW TO ASK FOR FUNDING FOR CORE SUPPORT

Training and mentorship are examples of vital non-financial resources that can be mobilized by YLOs. These types of activities may be part of funded projects (e.g. official capacity building activities). In other cases, they may come about through more informal connections.

If there is a specific area where your organization requires non-financial support, it can be helpful to develop a one-to-two-page concept note summarizing the “ask” and then circulate via networks, such as the IAWG newsletter.



5. Timely

- a. Contracting between donors and youth-serving partners and YLOs takes place in a fair and timely manner—requiring minimal paperwork and shorter due diligence processes.
- b. Funding is provided in a timely manner, allowing for a larger amount of funds at the start of the project to enable YLOs to begin the work immediately without having to use other project funds.

6. Mutuality

- a. There is an understanding that YLOs are experts in their work and experiences. YLOs are not necessarily fluent in the language and internal mechanisms of donors and other agencies, thus these youth-serving partners must promote an open exchange of knowledge that values each other's expertise.
- b. The learning experience is reciprocal, not just one way from the donor/partner to the YLO, but back and forth. This forms a meaningful and productive youth-adult partnership that promotes intergenerational dialogue.

Advice, tips, and resources for negotiating partnerships

The guide developed a checklist of advice and tips, as well as additional resources to consult at the end of this section. All of the guidance was provided from YLO experience, but primarily adapted from the two previous resources mentioned—We Trust You(th) Initiative's recommendations and CHOICE for Youth and Sexuality's toolkit.

- ✓ Choose the donor that is right for your YLO. **Not every donor matches with every type of organization—try to find your best match.**
- ✓ Define the goal of the partnership early. Forge a clear understanding of the shared goals and the **unique strengths that each partner brings to the table.**
- ✓ Co-create the scope and mechanisms of engagement. Request that the donor or partner engages your staff from the inception of the partnership to co-create the scope and mechanisms of engagement. Instead of a top-down approach where a pre-conceived project is imposed on YLOs, **your organization's inputs should be included from the beginning as a mutual partner in the project.**
- ✓ Challenge and equalize power imbalances between your YLO and your donor / partner. **Do not be afraid in sharing your expectations and openly communicating concerns or frustrations.**
- ✓ Seek out and **request leadership training and skill development** from your donor or partner, in addition to requesting additional funding for capacity strengthening in other areas your organization is seeking growth. This could include areas your organization wants to be able to eventually support on its own, such as developing and maintaining a website.
- ✓ Be mindful of one-time engagements. Some of these advocacy events are helpful in creating relationships with other organizations; however, to ensure sustained and meaningful engagement between your YLO and future partners, **it is important to communicate to donors and partners that your YLO wants sustained projects and opportunities beyond one-time events.**



Below are some great examples submitted by IAWG ASRHR SWG YLOs on ways their organizations have formed equitable partnerships with other youth-serving organizations:



• **Burundi:** The Midwife in Action's Association Vyara Uheke (MAA) is a YLO in Burundi that connects and supports midwives to help improve maternal and child health. MAA has built collaborations and partnerships with a range of organizations, including the Burundi MOH, WHO Burundi, the Gynecologist Association of Burundi, and the International Confederation of Midwives. These partnerships have helped amplify their advocacy efforts to value and promote the midwifery profession.



• **Cameroon:** Mifali formed a three-year partnership with the Global Fund for Women in Cameroon. This has the YLO to amplify youth participation and advocate for ASRHR, gender equality, and adolescent leadership. With Global Fund for Women's support, Mifali's advocacy efforts gained momentum, connecting them to a wider network of youth-led movements worldwide. Women for a Change also played a vital mentorship role, offering essential resources, such as office space and Zoom access. This allowed Mifali's members from different parts of the country to come together, fostering inclusivity and cohesion. By building equitable partnerships with international and local organizations, Mifali showcased the benefits of empowering young leaders to take charge of decision-making and resource allocation.



• **Nigeria:** Parkers Mobile Clinic delivers family planning, comprehensive SRH services, and SRH education services at the doorstep of vulnerable women and children in Southeast Nigeria. By partnering with international media organizations, Parkers Mobile Clinic has reached around 120,000 young people with SRH information through radio, TV, and social media since 2021.



• **Uganda:** Engagement with international initiatives has helped Touch the Heart, a YLO in Uganda, to strengthen connections with like-minded organizations, widen their reach, and take a holistic approach to ASRHR. These include collaborations with the Period Equality Network (hosted by Irise Institute East Africa), IAWG, FP2030, SheDecides, and Girls Not Brides.



Photo: Save the Children



CHAPTER 5: DATA FOR IMPACT



Overview and key points

This chapter outlines approaches to planning, monitoring, evaluating, and learning for YLOs. Much of the guidance is summarizing content and tools from the ASRH Toolkit; however, the guide also points to some resources specifically developed for YLOs, but not necessarily adapted for humanitarian settings. The guide points to ways to use each of these resources for your needs. The specific sections in this chapter include:

- Demonstrating impact
- Planning and measuring success for YLOs
- Monitoring
- Learning and evaluation
- Additional resources to consult

The key points from this chapter include:

- Data and evidence should be prioritized by YLOs because it's important for accountability, donor engagement, continuous learning and improvement, advocacy, and team motivation.
- Understanding key concepts for planning and measuring success for YLOs, including needs assessment, theory of change, monitoring, evaluation, and learning, provide a strong foundation for YLOs to use data to improve their programming and expand their reach.
- A range of tools to help document impact already exist and are free for YLOs to use.

Demonstrating impact

Humanitarian settings are busy environments, with an urgency to deliver services and lots of competing priorities. Despite this, demonstrating impact is still essential in humanitarian settings and must be prioritized by YLOs. Some of the reasons for this include:



• **Accountability:** all organizations working in humanitarian settings are accountable to affected people and communities. YLOs must be able to demonstrate how their work delivers a positive change in people's lives. Where programs receive funding, evidence from monitoring and evaluation can help to show how that money was spent and what was achieved, ensuring accountability to donors too.



• **Partner & donor engagement:** evidence of results helps YLOs set out a strong case to prospective partners and donors. Communicating previous experience and successes helps build confidence among funders about the benefits of their investment.



- **Learning and improvement:** collecting and analyzing information on what works—and what does not work—helps humanitarian actors to continuously learn and improve. This evidence helps YLOs to adapt ongoing activities, incorporate lessons into new program designs, or share best practices with other organizations.



- **Advocacy:** evidence can be used to advocate for the SRHR of adolescents, influence policies, and raise awareness about the gaps in services across the humanitarian continuum. Using data is a very helpful strategy in advocating for certain language to be included in key documents at coordination meetings.



- **Team motivation:** understanding how an organization has helped to improve SRH in humanitarian settings can be very motivating for the team! Knowing the impact your organization is making on young people in your community, in addition to your organization's staff knowing that the data they are collecting is being used, provides purpose and catalyzes passion to keep doing this important work.

Planning and measuring success for YLOs

Activities for planning, monitoring, evaluating, and learning can be organized around the project cycle. There are lots of concepts relating to planning and measuring success. The guide has highlighted key areas from the ASRH Toolkit for YLOs to review and use within their organizations. Inclusion and diversity should be integrated into every aspect of ASRH program design, implementation, monitoring, and evaluation. This includes disaggregating data by age, gender, and other relevant characteristics. It is also helpful for YLOs to reflect on which adolescents may be excluded from different evidence or data collection approaches.

Needs assessment

In a humanitarian crisis, it is critical to understand the situation of different subgroups of adolescents to respond to their specific SRH needs. Needs assessments help to identify needs or gaps between current and desired conditions, as well as factors that contribute to those identified gaps. Data collection should be guided by what you need to know, instead of what questions you can ask or what would be nice to know. The methods for the needs assessment should be tailored to the context and population—focus group discussions and participatory approaches, such as community mapping exercises, are well suited to young people.

In an acute emergency, data should be shared as soon as possible with other partners to ensure it can be acted on quickly. Each organization does not need to conduct their own assessments, instead organizations should coordinate and only collect information that does not already exist and that is needed to inform the humanitarian response as a whole. The information gathered can then be used to inform program design and ensure that ASRHR services are accessible and acceptable to all young people.

The ASRH Toolkit includes lots of materials to support needs assessments with adolescents, including:

- [DOs and DON'Ts](#)
- [Checklist for conducting assessments](#), including guidance on safeguarding, informed consent and assent, participation, and data management
- [Links to tools](#) for different types of assessments
- [Examples of data to use](#) in needs assessments

! A WORD OF CAUTION

Different words are sometimes used by different donors or organizations to refer to similar concepts (e.g. results framework versus log frame). This can be confusing! Do not be afraid to ask clarifying questions to ensure you understand what is required of your YLO.



Theory of change

Based on needs, YLOs can plan goals to support the SRH of affected adolescents. A theory of change describes how the goals will be achieved—showing the causal links between what you do and what you are trying to achieve, as well as the underlying assumptions.

A theory of change can be presented in a results or logical framework. A logical framework—typically referred to as a log frame—includes the necessary inputs (resources) and outputs, as well as the expected outcomes and overall goal(s). The ASRH Toolkit includes a [sample logical framework](#) and YouthDolt also provide [guidelines](#) for working with a theory of change as a YLO, including what a theory of change is and how to work with them.

Monitoring and analysis

Monitoring is the ongoing, systematic collection and analysis of data as a project progresses. It is aimed at measuring progress towards the achievement of project milestones and carefully selected indicators—often outlined in the results or logical framework.

In the ASRH Toolkit, YLOs can view a wide range of helpful guidance and tools, including:

- [List of recommended output and outcome indicators](#): sometimes donors require specific indicators to be monitored. Where possible, it is important to involve young people in the selection of indicators to ensure that they are relevant and meaningful.
- [Data collection methods and tools](#): the ASRH Toolkit provides ideas for how YLOs and young people can be involved in data collection to increase engagement and ownership of humanitarian programming. The Toolkit provides focus group discussion tips and guides, as well as assessment questions your organization can use with different types of interviews with adolescents, youth, community members, and other stakeholders.
- [Data analysis methods and tools](#): this includes both quantitative and qualitative methods. YLOs and young people have an important role to play in analysis to provide nuance and additional inputs to data gathered, as well as verifying that takeaways and summaries reflect what young people stated.

Regularly collecting, documenting, and reviewing SRH data is critical to understanding the performance and quality of the services a project is providing to adolescents. Monitoring allows YLOs to identify changes in adolescents' conditions and make timely adjustments.

Learning and evaluation

Learning

Humanitarian settings are dynamic, so it is important for YLOs working across the humanitarian continuum to continuously learn and improve. Regular reviews can help to identify areas that need to be strengthened or adapted to ensure that projects best meet the needs of young people in humanitarian settings. Lessons should be documented, shared, and incorporated into the project cycle, as well as the design of future programs. Learning activities do not need to be resource intensive. They can include simple reflection exercises, minutes from review meetings, and recording case studies. The [UNICEF Knowledge Exchange Toolbox](#) has lots of great learning exercises that can be used by YLOs.

Evaluation

Evaluation is a process for determining whether a project has met expected objectives and/or the extent to which changes in outcomes can be attributed to the project. Evaluations can be an important source of evidence for documenting impact, and where appropriate, should be planned and budgeted for in the planning stages of the project. Evaluations can be costly



and often require an external specialist. This means they are not always feasible for YLOs to conduct independently. Instead, there may be options for your project to be included as part of a wider inter-agency evaluation. These opportunities may be advertised and discussed at partner coordination meetings. Evaluations can require a longer-term time frame. This means they are not always appropriate for humanitarian settings, for example, in acute situations.

The ASRH Toolkit includes more details on evaluations, including:

- [Components of an evaluation protocol](#)
- [Meaningful engagement of adolescents in evaluations](#)
- [Evaluation criteria](#)

Additional resources to consult

- ACAPS and the Emergency Capacity Building Project produced this [guide](#) as a practical resource to needs assessments in humanitarian response.
- CHOICE for Youth and Sexuality created a [toolkit](#) for YLOs to use for planning, monitoring, evaluation, and learning.
- The [Research-to-Change Toolkit](#) developed a toolkit for supporting YLOs to conduct research and use data.



Photo: Reginald Louissant Jr



CHAPTER 6: OPERATING AT HIGH QUALITY



Overview and key points

This chapter aims to support YLOs to operate at high quality, and demonstrate this high quality to donors, especially those that may be unfamiliar with working with YLOs. There are many resources that support organizational capacity strengthening for YLOs, which are referenced here. This chapter focuses mainly on tools and guidance specific to supporting YLOs to deliver high-quality ASRH in emergencies activities.

The specific sections in this chapter include:

- Organizational readiness
- Operational guidance
- Training and skill building
- Resource mobilization

The key points from this chapter include:

- At the onset of humanitarian crises, the situation is often chaotic. Make sure your organization is prepared to partner and respond quickly before a crisis hits, for example, by developing and regularly reviewing a humanitarian preparedness plan and partner mapping.
- Ensuring your organization is providing high-quality ASRH programming means your YLO is implementing activities that are gender-responsive and inclusive to the young people are you serving, as well as flexible to changing circumstances.
- Capacity building of YLO staff and volunteers helps to ensure they are comfortable and supported to work on ASRHR in humanitarian settings. Training and mentoring plans should be targeted based on the gaps identified in capacity assessments.
- Resource mobilization can include grants, as well non-financial resources. Many youth-serving organizations and funders have made commitments on youth participation and leadership—these can be highlighted in donor engagement.



Photo: Mifali, Cameroon

Operational readiness

At the onset of humanitarian crises, the situation is often chaotic. Make sure your organization is prepared to partner and respond quickly before a crisis hits, for example, by developing and regularly reviewing a humanitarian preparedness plan and partner mapping.

There are some basic things that YLOs should have in place for quality operations. These areas include:

- Governance e.g. registration certificates, clear way of managing staff
- Organizational management e.g. strategic plan, annual report
- Financial management e.g. bank account, functioning budget, appropriate financial controls
- Human resources e.g. safeguarding policy, policies for paying employees

If your organization does not have policies or strategies related to these areas or you are unsure how effective your organization operates within these areas, there are many tools for YLOs to help support assessments and creating action plans to address weaknesses. Organization capacity assessments (OCA) tools can be used to evaluate an organization's internal operations and identify which functional areas are working well and which are missing or need improvement. Many OCA tools are not adapted specifically for YLOs. However, there are a variety of existing OCA tools that can be used as a starting point, such as the [Advancing Partners & Communities OCA tool](#).



Photo: Mifali, Cameroon

Operational guidance

To ensure your YLO is providing quality ASRH programming, the guide recommends some key principles to be incorporated into your activities. These include ensuring your program is:



- **Gender-responsive:** your activities should recognize the unique needs and experiences of adolescent and youth girls and boys, as well as differing sexual orientations and gender identities. Programs should seek to promote gender equality through all facets of the project from their design, implementation, and monitoring and evaluation.

- Design: in your proposal, your YLO should include ways to recognize risk factors, needs, and preferences of the adolescents and youth you are trying to reach, including the unique challenges faced by girls and boys, as well as young people who identify as lesbian, gay, bisexual, transgender, queer, intersex, or asexual+ (LGBTQIA+).
- Implementation: throughout implementation, your program should be creating safe spaces and encouraging participation from each of the groups of young people you are working with. This could include having separate education sessions for adolescent girls and youth girls, a part from adolescent and youth boys, to make sure both boys and girls feel comfortable participating.
- Monitoring and evaluation: one way to help make sure your YLO is reaching the targeted adolescents and youth you are aiming to is to collect and monitor that data (see [Chapter 5: Data for Impact](#) for more information). The guide recommends collecting data that identifies the age and gender of the beneficiaries. If possible, your organization can also note any individuals your program is reaching that have characteristics that put them at increased risk for poor SRH outcomes, such as young people identifying as LGBTQIA+ or young people with disabilities. All of these additional data points allow your YLO to better adjust programming to meet the needs of those subgroups, as well as report to donors on how your program is responsive to the unique needs of all the adolescents and youth you are serving.



- **Inclusive:** Your YLO should also be promoting inclusion and diversity in your program operations.

- This includes how you recruit and train your staff and volunteers. ASRH programs should aim to recruit staff and volunteers who reflect the diversity of the communities they serve and provide training on inclusion and diversity. This includes addressing unconscious biases and promoting cultural competence. To help overcome negative attitudes and biases within your organization's staff, explore different VCAT exercises provided in this guide.
- Inclusion should also be promoted through how you engage young people, as well as community members, you work with; for more information on this, see Chapter 3: Mobilizing and Sustaining Engagement.



- **Flexible:** Humanitarian emergencies are notoriously unpredictable. Your organization must be ready to adapt, pivot, and change course. Fortunately, YLOs are strongly positioned to do this! The young people in your organization can provide new ideas and innovative strategies to overcome barriers presented in humanitarian contexts. It is important to remain flexible to all changes, including changes in donors, changes in operating environment, and many others.

Expanding your reach

YLOs are often at the center of grassroots communication, with knowledge and access to new technologies and communication channels. YLOs can use this unique position for outreach and increasing visibility of their work.

- **Outreach:** outreach activities should be tailored to young peoples' preferred communication style and information channels. For example, social media platforms such as Facebook, Instagram, Viber and TikTok can offer an effective and low-cost means for two-way communication with young people. Different social media platforms may vary in popularity or accessibility with different audiences across humanitarian settings. During the COVID-19 pandemic, many organizations used innovative strategies to reach beneficiaries; YLOs are adept at using new technologies and should not be afraid to explore different outreach strategies, including new media and technology platforms. The [ASRH Toolkit](#) provides examples of different communications, media, and technology approaches, as well as best practices for utilizing these initiatives.
- **Visibility:** YLOs can use social media and other communication channels to benefit their work in other ways too. For example, short videos or high quality visuals can increase visibility of activities and highlight the importance of ASRH in humanitarian settings. They can also help potential partners and stakeholders find out about your work, potentially leading to new partnership opportunities. In some cases, social media and visibility will be a requirement of donor and compliance agreements.

Training and skill building

Professional development helps to equip YLO staff with the knowledge and skills to develop and sustain quality ASRH programs across the humanitarian continuum. Capacity building should be an ongoing process. **One-time trainings are not effective!** Training and capacity building should be guided by a plan that focuses on specific gaps, developed in collaboration with your staff.

Typically, organizations have a SRH manager or coordinator who oversees different activities; however, YLO staff often serve in several different roles for different projects and donors. Depending on the structure and human resources of an organization, responsibilities may be shared among different staff and volunteers. YLOs can use [ASRHR Coordinator job description](#) from the ASRH Toolkit to guide the responsibilities of their staff and volunteers, and match these roles to the skills and strengths of their team.

It is important for whomever is in charge of leading SRH activities that they understand what SRH services your organization provides (and does not provide), what SRH services are available in your area (and not available), and how to refer young people to SRH services. When onboarding new staff to your organization, your YLO should provide information on child safeguarding and security inductions, in addition to helping staff understand what they will be doing as part of their job.

Training programs should be tailored to the level of education, language skills, and cultural background of your staff. Training should be relevant and engaging, incorporating practical skills and tools that can be applied in real-life humanitarian preparedness and response. The ASRH Toolkit includes a series of [training tools](#) to support the capacity building of staff working with adolescents in humanitarian settings, which your YLO can use to tailor to the specific training needs of your organization.

! ATTENTION

If you are successfully awarded a grant, it is important to negotiate funding agreements before the contract is signed. This includes receiving more funds upfront before the start-up of activities. There are also some things that are not negotiable! See [Chapter 4: Equitable & Sustainable Partnerships](#) for more information.



Resource mobilization

Resource mobilization refers to a whole range of financial and non-financial support to strengthen the work of YLOs. This can include grants and funding through partnerships, as well as training and mentorship. A key part of organizational planning is sustainability—it is helpful to think about this as part of a broader resource mobilization strategy. Grants for ASRH in crises may be funded by governments, foundations, companies, and donations. Different donors have different priority areas and requirements, including thematic areas, geographies, timescales, compliance, and reporting. Some larger programs include a small grant mechanism that YLOs and other civil society actors can apply to—these are often shared via social media, IAWG newsletter, and other inter-agency platforms.



Photo: Save the Children, Egypt

Advice & tips

It is not always easy for YLOs to access institutional funding. Some approaches to strengthen the chances of securing external funding are:

Do your research! Many youth-serving organizations and funders have made commitments on youth participation and leadership—YLOs can reference these commitments when discussing funding opportunities. Find pledges on websites such as the [Compact for Young People in Humanitarian Action](#), organization’s individual websites, or just by googling. For example, by googling “UNFPA youth leadership commitments”, your YLO can also use UNFPA’s website to understand its commitments, as well as what the agency provides to YLOs for grants and support and what types of programs they have previously financed. Donor websites are also helpful for looking at the donor’s strategy, mission, and vision, which your YLO can use for framing your proposal to show how your activities and organization contribute to their goals.

Remind donors and prospective partners about global agreements such as the [Grand Bargain](#), launched in 2016 at the World Humanitarian Summit, to help advocate for funding. The Grand Bargain committed at least 25% of humanitarian funding to go to local and national responders as directly as possible.

Plan longer-term donor engagement and prioritize the best suited donors.

If there is a specific project/need that your YLO is trying to fundraise for, write a short one-to two page “concept note,” which outlines the needs of the affected-population and/or problem you are trying to solve, why your organization is well suited to address that need, and what you intend to do (with expected results). This concept note can be shared with potentially interested funders—you do not need to wait for calls for proposals to apply for funding.

Ensure that when submitting proposals to donors that your YLO is including funding for recurring costs, such as office rent, printer supplies, and car maintenance, as well as funding to encourage your staff to stay. There are many ways of allocating funding for staff benefits. Some organizations dedicate a line to “fringe benefits” to cover costs related to sick and vacation days, parental leave, and well-being events for your staff. [Annex D](#) provides a sample budget to show how you might allocate funding for fringe and recurring costs.

YLOs can use creative communication tools to craft your reputation, share key milestones in your work, and reach out to peers. This also makes it more likely that partners and donors will proactively reach out to you, which may improve resource mobilization in the future.

Partner with larger organizations as a “sub-implementer” in grant agreements, especially where donors are looking for young people’s expertise.

YLOs should make the most of internal resources and align organizational plans with these, rather than relying on or increasing expectations for external funding. Some of the best resources for any organization are people’s time! Please refer to the section on [Ensuring sustainability in Chapter 3](#) for more information on networks, challenges such as “aging out”, and remuneration for YLOs.

Demonstrate your readiness to receive funds with strong compliance and financial management systems (subsection [Operational readiness](#)), trusted partnerships and networks ([Chapter 3](#)), and document the results of your work ([Chapter 5](#)).

The guide includes some sample proposal and budget templates which were adapted from a call for applications to YLOs from the IAWG ASRHR SWG during the COVID-19 pandemic. See [Annex C](#) and [Annex D](#) for more information.

Additional resources to consult for fundraising for YLOs, include:

- CHOICE for Youth and Sexuality's resource: [Investing in Youth impact: A toolkit on funding for Youth-led Organisations](#)
- The ASRH Toolkit guidance on [resource mobilization](#) for ASRH in emergencies
- Aga Khan Foundation's Learning Hub provides a [free proposal development online course](#) for civil society organization staff seeking to strengthen their proposal development skills for international donors.

! ATTENTION: SMALL GRANTS MECHANISM FOR YLOS

The [Youth Compact Champions Programme](#)—a part of the Compact for Young People in Humanitarian Action—was a fund launched in 2020 to support youth action around the world, with funding decisions made by young people themselves.



Photo: Save the Children, Colombia



Photo: Save the Children, Bangladesh

CONCLUSIONS



The guide aims to support YLOs and youth-serving organizations to take their rightful place within humanitarian coordination and programming for ASRH. It highlights the most essential information for YLOs supporting ASRH across the humanitarian continuum and signpost key resources in the ASRH Toolkit. Through equitable and sustainable partnerships, high quality operations, and programs that prioritize meaningful participation, holistic approaches, and evidence, YLOs can support adolescents in humanitarian settings to make informed and autonomous decisions about their SRH, guarantee their rights, and be able to reach their full potential—in their intersecting diversities.

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ANNEXES



Annex A: Cheat Sheet for Adolescent-Inclusive MISP

This is a tool referenced in [Chapter 1](#) of the guide. This tool was adapted from the IAFM tool, which provides a quick reference to the objectives, key actions, and other valuable information to have readily available when implementing the MISP. The guide focused this cheat sheet on implementing the Adolescent-Inclusive MISP; on the second page is guidance from Table 1 on how to apply the Adolescent-Inclusive MISP for YLOs. The cheat sheet does not provide all of the information from Table 1, but instead offers a condensed version for YLOs to use when attending coordination meetings and/or implementing the MISP.

CHEAT SHEET FOR ADOLESCENT-INCLUSIVE MISP

Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings
iawg.net/IAFM

OBJECTIVE 6: PLAN FOR COMPREHENSIVE SRH SERVICES, INTEGRATED INTO PRIMARY HEALTH CARE AS SOON AS POSSIBLE. WORK WITH THE HEALTH SECTOR/CLUSTER PARTNERS TO ADDRESS THE SIX HEALTH SYSTEM BUILDING BLOCKS:

Service Delivery

- Including the needs of adolescents and youth, particularly those from sub-groups that are at increased risk and with unique SRH needs (such as indigenous populations, adolescents living with HIV/AIDS, etc)
- Recognize the importance of privacy and confidentiality for adolescents when identifying sites

Health Workforce

- Including staff capacities to counsel and provide SRH services and information to adolescents and youth (eg family planning, safe abortion care, and clinical management of rape)
- Including observing staff attitudes and biases toward providing SRH services and information to adolescents
- If possible/feasible, hire male and female staff with appropriate skills and experience to allow patients to choose their preferred provider

Health Information System

- Advocate for and identify approaches to integrate age- and gender-disaggregation of data

Medical Commodities

- Examine SRH commodity needs of adolescents to better anticipate stock shortages and ensure availability of commodities for crisis-affected adolescents (eg ARV medications, clean delivery kits, and abortion commodities)

Financing

- Begin discussions with adolescent/youth organizations to understand financial barriers and opportunities

Governance and Leadership

- Examine how perceptions of SRH services for adolescents affect providers' ability/delivery of SRH services for adolescents
- Begin discussion with MOH on adolescent strategies
- Discuss opportunities to bring adolescents/youth and community members together to talk about SRH needs, barriers, and opportunities for adolescents to receive the services they need

OBJECTIVE 1: ENSURE THE HEALTH SECTOR/CLUSTER IDENTIFIES AN ORGANIZATION TO LEAD IMPLEMENTATION OF THE MISP. THE LEAD SRH ORGANIZATION:

- Orient SRH Coordinator to ASRH needs and services
- Ensure adolescents and/or youth are included in coordination meetings and decision-making
- Leverage existing adolescent and youth networks to engage adolescents and youth, as well as local organizations, in stakeholder meetings
- Advocate with Health Cluster to ensure ASRH services and information are accessible to adolescents during MISP implementation
- Advocate with Health Cluster to ensure adolescents' SRH needs are included in rapid needs assessments
- Coordinate with other organizations to identify adolescents at increased risk and ensure that they have access to reproductive health services [For example, coordinate with the Health Cluster and other sectors to identify pregnant adolescents in the community and link them to health services]
- Map ASRH stakeholders and services and share information among SRH partners to avoid duplication of services and ensure SRH coverage for all adolescent populations
- Strategize with community members and/or adolescents and youth organizations and networks on communication channels to reach adolescents at onset of emergencies

- Develop close including adol
- Provide adole can be access
- Engage comm SRH and health
- Provide adole of sexual viole

OBJECTIVE 5: PREVENT UNINTENDED PREGNANCIES:

- Emphasize that all contraceptive methods, including LARC methods, are safe and effective for adolescents
- Ensure service providers are fully aware of local policies to offer adolescents a full range of contraceptive methods to the full extent of the law
- Health staff should be aware that adolescents requesting contraceptives have a right to receive these services, regardless of age or marital status, in accordance with local laws and policies
- Promote the use of dual protection methods (prevention of pregnancy and prevention of STIs, including HIV) for adolescents

OBJECTIVE 2: PREVENT SEXUAL VIOLENCE AND RESPOND TO THE NEEDS OF SURVIVORS:

coordination with child protection to ensure needs of sexual violence survivors, adolescent boy survivors, are recognized and adequately responded to
 adolescents with information about what SRH services are available and where they can be accessed
 community health workers (CHWs) to link adolescent survivors of sexual violence to health services
 adolescent-friendly care and safe abortion services if desired for adolescent survivors of sexual violence at health facilities

OBJECTIVE 3: PREVENT THE TRANSMISSION OF AND REDUCE MORBIDITY AND MORTALITY DUE TO HIV AND OTHER STIS:

- Provide adolescents with information about what STI services are available and where they can be accessed
- Promote the use of dual protection methods (prevention of pregnancy and prevention of STIs, including HIV) for adolescents
- Ensure adolescents have continued access to ART and provide post-exposure prophylaxis (PEP) to adolescent survivors of sexual violence as appropriate and for occupational exposure
- Ensure ART adherence support activities are available for adolescents
- Ensure that adolescent-friendly health services are available for adolescents presenting to facilities with symptoms of STI

GOAL PREVENT MORTALITY, MORBIDITY, AND MORTALITY IN CRISIS-AFFECTED POPULATIONS

OBJECTIVE 4: PREVENT EXCESS MATERNAL AND NEWBORN MORBIDITY AND MORTALITY:

- Encourage facility-based delivery for all pregnant adolescents and provide them with information about what SRH services are available and when and where they can be accessed
- Clean delivery kits should be provided to visibly pregnant adolescents, as well as to birth attendants to promote clean home deliveries when access to a health facility is not possible
- Raise community awareness about the risks of adolescent pregnancy, danger signs in pregnancy, and the importance of skilled birth attendants and facility-based delivery for adolescent mothers
- Engage trained birth attendants (TBAs) and CHWs to link pregnant adolescents and mothers to health services
- Engage TBAs and CHWs to link pregnant adolescents to health services
- Provide pregnant adolescents with information about what SRH services are available and when and where they can be accessed

Other Priority Activity: Safe Abortion Care

- Ensure at least one trained provider is available to provide adolescents with counseling and safe abortion care services with at least one WHO-recommended method and post-abortion contraceptive services
- Safe abortion care should be provided to adolescents in accordance with local laws and providers should not impose additional barriers for adolescents to access safe abortion care
- Engage TBAs, CHWs, and adolescent champions to link adolescents seeking abortion services to the health facility
- Inform community leaders and adolescents regarding the availability of safe abortion services for women and adolescent girls
- Conduct outreach activities and distribute IEC materials that outline the national laws and policies related to safe abortion care and consent for adolescents

The Adolescent-Inclusive Minimum Initial Services Package

(MISP) for sexual and reproductive health (SRH) is a set of priority life-saving SRH services and activities—tailored to be inclusive of adolescents' SRH needs—to be implemented at the onset of every humanitarian emergency; these actions aim to help prevent excess SRH-related morbidity and mortality. All service delivery activities of the Adolescent-Inclusive MISP need to be implemented simultaneously through coordinated actions with all relevant partners.

The Adolescent-MISP adapts key actions from the MISP of the Inter-Agency Field Manual for Reproductive Health in Humanitarian Settings to be inclusive of the unique SRH needs of adolescents living emergency contexts. The Adolescent-Inclusive MISP can be found in the Adolescent Sexual and Reproductive Health (ASRH) Toolkit for Humanitarian Settings: 2020 Edition. A supplemental guide that was developed for YLOs to implement guidance from the ASRH Toolkit also includes the Adolescent-Inclusive MISP but provides additional content for adapting the activities to a YLO. Overall guidance on those activities from the supplemental guide is outlined on in this cheat sheet. For more detailed information, please visit IAWG's website to view the Supplemental Guide to the Adolescent Sexual and Reproductive Health Toolkit for Humanitarian Settings for Youth-led Organizations.



Adapting Adolescent-Inclusive MISP to YLOs

There is key support and technical expertise YLOs can offer across all of the MISP objectives to ensure inclusion of adolescent needs, address barriers to adolescent SRH access and use, and utilize assets of young people in humanitarian settings. These are included below.

- For implementing all components of the Adolescent-Inclusive MISP, YLOs should understand what humanitarian services (not only health) are provided in their area, what services are not provided, and how to refer adolescent and youth clients to receive the services they need, including child protection services. This includes understanding local laws and policies regarding what services adolescents and youth are eligible to receive and any related restrictions/regulations. If unsure of what services adolescents can receive/what services are available to them in their area, YLOs should consult other health partners.
- During coordination meetings, YLOs can leverage their networks to engage adolescents and youth from the affected communities, including subgroups of adolescents that are harder to reach for other organizations.
- YLOs can raise concerns from adolescents and youth in their area who are seeking SRH services and advocate/propose solutions to addressing those concerns during meetings with other health partners. These could include issues related to accessibility, confidentiality, privacy, commodities/supply shortages, and others.
- YLOs can share information on how they are providing adolescents and youth information about where SRH services are, share lessons learned, and coordinate with other partners to avoid duplication and ensure young people are receiving the SRH information they need.
- YLOs can provide orientations and trainings on the unique needs and barriers of adolescents and youth for health staff, community volunteers/health workers, traditional birth attendants, government staff, and health staff from other organizations. For YLOs with expertise in adolescent-friendly service provision, they can also advocate for facilitating/co-facilitating trainings for health staff on how to provide adolescent- and youth-friendly services.
- YLOs can conduct assessments and interviews to understand the needs of adolescents and youth in their community and/or partner with other youth-serving organizations to implement these initiatives.



Inter-Agency Working Group on
Reproductive Health in Crises

Annex B: Multi-Sectoral Tool for Integrating ASRH in Emergency Responses (adapted for YLOs)

This is a tool referenced in the [Tools for Building Multi-Sectoral Linkages](#) section of [Chapter 6: ASRH Services & Interventions of the ASRH Toolkit for Humanitarian Settings: 2020 Edition](#). IAWG developed a multi-sectoral tool to assist SRH managers with identifying ways to integrate ASRH activities across all humanitarian sectors and identify strategies for reaching adolescents. The guide has adapted this tool for YLOs to use within their organizations to discuss how to integrate ASRH activities in their humanitarian programs. YLOs can also use this tool when working with other youth-serving organizations to advocate for multi-sectoral activities at coordination meetings and to propose activities for proposals and partnerships.

The tool also provides specific activities for reaching adolescents at increased risk with SRH information and services (in bold). Below the table of multi-sectoral examples is a template YLOs can use to fill out with their own staff or staff from other organizations.

Purpose	This tool is intended to assist YLOs with identifying ways to integrate ASRH activities across all humanitarian sectors, including ways to reach sub- groups of adolescents at increased risk.
Guidance	This tool provides examples of ASRH activities that YLOs should advocate for integrating within each humanitarian sector. The tool also provides specific activities for reaching adolescents at increased risk with SRH information and services (in bold). Below the table of multi-sectoral examples is a template for YLOs to use when discussing ASRH opportunities with staff outside of the health sector, including staff from other organizations.
Vulnerability of Adolescents	<p>Adolescents are a heterogeneous group of individuals that have unique needs and concerns and can face discrimination based on their age, sex, gender identity, disability, sexual orientation, and bodily diversity. Thus, ASRH programs must be tailored to the individual needs and risk factors of adolescents in need of SRH assistance. A “one size fits all” mentality will not be effective in addressing the SRH needs of adolescents, particularly those in the most difficult of circumstances—a humanitarian crisis. ASRH programs should aim to reach all adolescents, with particular attention on subgroups of adolescents that are at increased risk during humanitarian emergencies. These include, but are not limited to:</p> <ul style="list-style-type: none">• Pregnant adolescents• Adolescents with disabilities• Adolescents with diverse SRH needs (including indigenous groups, those living with Human Immunodeficiency Virus [HIV], those identifying as Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual+ [LGBTQIA+])• Adolescent heads of households

Examples of Multi-Sectoral Activities by Humanitarian Sector

Sector ASRH Integration Activities

All Sectors

- Ensure all staff know what SRH services are offered to adolescents, where they are offered, and how to refer services that are unavailable to other facilities/organizations
- Ensure information sharing and referral mechanisms are in place between health and other humanitarian services (such as legal services, gender-based violence services, etc.). If they are not, or your YLO is unaware, consult other youth-serving organizations to confirm and/or advocate for these mechanisms to be established or become more functional
- Train all staff on 1) the sensitivities of SRH information, particularly for adolescents; 2) impact of judgmental language, behavior, and bias on ASRH uptake; and 3) assurance of privacy and confidentiality in delivery of ASRH services
- Ensure your YLO staff are meaningfully engaging adolescents and community members prior to initiating activities and advocate for meaningful engagement with young people for other humanitarian partners your YLO works with
- Staff should share relevant ASRH data collected (such as during focus group discussions or assessments) with other team members and with other health organizations
- Educate staff on discreet locations for adolescents to receive SRH services (eg adolescent entrances, condoms in bathrooms) so that all staff can direct adolescents to these adolescent-friendly entrances / ways to receive SRH services. If none exist, propose discreet locations (after discussing with adolescents themselves) to add/adjust in health facilities and other places adolescents gather with other youth-serving partners

Adolescents at Increased Risk:

- Ensure humanitarian facilities are accessible for adolescents with disabilities (eg providing ramps). If these do not exist, advocate for building / renovating structures for them to exist for individuals with disabilities.

Health

- Work with all health staff from your organization and other youth-serving organizations to implement the Adolescent-Inclusive Minimum Initial Service Package for Sexual and Reproductive Health in Crisis Situations (MISP) components
- Coordinate with other health organizations and local government to understand where ASRH services are available to coordinate referral mechanisms and avoid duplication (MISP Objective 1)
- Work with other health partners to ensure all adolescents and youth have access to condoms; work with health facility staff to provide condoms in consultation rooms, throughout facilities, as well as in discreet locations (such as bathrooms)
- Ensure that community distributions of condoms are always accompanied by demonstrations on how to use them
- Educate health staff from your organization and other youth-serving organizations on services that your organization provides that benefit adolescents in your program areas
- Develop and disseminate ASRH messages to share at all entry points that adolescents visit (not just the health facility, such as youth centers, sports fields, food distribution sites, etc.)
- Work with all staff to design outreach services to increase ASRH service uptake
- Consider how self-care services can be promoted in your program, in coordination with your area's health facility and with other youth-serving partners providing those services
- Provide feedback mechanisms for adolescents receiving your organization's services and work with your area's health facility to advocate and/or facilitate exit interviews for adolescents to provide confidential feedback on the services they are receiving

Examples of Multi-Sectoral Activities by Humanitarian Sector

Sector ASRH Integration Activities

Health (cont.)

- Pilot test activities with adolescents to ensure they are appropriately tailored (eg have adolescents provide feedback for draft information, education, and communication [IEC] materials)

Adolescents at Increased Risk:

- Create tailored SRH messages, including pictorial messages, for adolescents with hearing impairments and low literacy
- Map adolescent subgroups at increased risk (eg pregnant adolescents, orphaned adolescents, etc) within coordination groups/meetings to understand needs & barriers

Cash and Voucher Assistance

- Work with organizations providing cash-for-health programs to ensure they include access for SRH services in their package of services
- Work with organizations providing minimum expenditure baskets for multi-purpose cash (MPC) assistance to ensure they include the cost of SRH and menstrual hygiene goods and services in their package of services
- Propose partnerships with organizations providing cash-for-health and MPC assistance to facilitate distributions and outreach activities

Adolescents at Increased Risk:

- Advocate for adolescents at increased risk (pregnant adolescents, adolescent heads of households, adolescent survivors of gender-based violence [GBV], etc) to be prioritized and eligible for MPC
- Advocate for adolescents at increased risk (pregnant adolescents, adolescent heads of households, adolescent survivors of GBV, etc) to be prioritized in cash-for-health programs [IEC] materials

Education

- Make SRH services and information available in formal and non-formal schools and educational and vocational centers
- Establish relationships with health staff/providers and education staff and work to build linkages between health and education staff to ensure issues affecting adolescents are addressed, as well as opportunities to increase engagement/coordination between education and SRH
- Work with Ministry of Education department and/or youth-serving organizations working in education to tailor sexuality education and life skills curricula or programs to ensure they are age, developmentally, and culturally appropriate, as well as addressing gender diversity and inclusion
 - Facilitate discussions with adolescents to see which sexuality education and life skills materials they prefer and/or gather feedback on proposed materials
 - Discuss with community members which SRH commodities might be possible to have available at education structures for adolescents (eg female hygiene supplies or condoms in bathrooms at an education center)
- In consultation with teachers/education staff, propose visiting classrooms/education centers with health staff visit to deliver SRH messages and/or provide demonstrations to adolescents and young people

Adolescents at Increased Risk:

- Include supportive messaging for young mothers to continue education after marriage and/or childbearing
- Create understanding among education staff about needs of LGBTQIA+
- Jointly research, respect, and promote traditional health practices that are helpful and strive to eliminate harmful traditional practices that adversely affect the health of adolescents, particularly adolescents at increased risk (eg adolescents from indigenous groups)

Examples of Multi-Sectoral Activities by Humanitarian Sector

Sector ASRH Integration Activities

Food & Livelihoods

- Advocate for the availability of and/or implement activities to ensure adequate food and nutritional services/programs for adolescents in your area
- Advocate for the provision of and/or implement activities to provide health and hygiene messages (including SRH messages and menstrual hygiene messages) at cash/food/voucher distributions
- Integrate SRH information into your organization's livelihood programs (or the programs of other youth-serving organizations you work with), especially life skills content that easily bridges both topics
- Work with food and livelihoods staff to expand availability of food and cash opportunities beyond male heads of households

Adolescents at Increased Risk:

- Prioritize adolescents at increased risk in distribution lines (eg pregnant adolescent girls, adolescents with disabilities, adolescent heads of households, etc)

Nutrition

- Ensure SRH messages are promoted, when appropriate, during nutrition consultations
- Jointly (with adolescents/youth) develop social behavior communication (SBC)/IEC materials that support nutrition needs and behaviors of adolescents

Adolescents at Increased Risk:

- Integrate pre-/post-natal consultations with nutrition services to address needs of pregnant adolescent girls
- Simulate or do role-playing exercises during trainings on how to provide infant and young child feeding counseling/services to adolescent mothers

Protection/ MHPSS

- Advocate for mental health and psychosocial support (MHPSS) consultation rooms to be far enough away from other rooms to allow for confidentiality and privacy for adolescents. This advocacy can be done at coordination meetings, and/or your YLO can propose this feedback during health facility assessments.
- Advocate for adolescent participation in any multi-sectoral GBV prevention task force
- Facilitate community dialogues and action plans where a key group of stakeholders—including adolescents/youth representatives—meet regularly to discuss challenges facing adolescents, including GBV, and develop and implement a plan to address at least one of the identified challenges

Adolescents at Increased Risk:

- Advocate for placement of child-, girl-, and women-friendly centers close to SRH services to increase access for adolescent girls
- Advocate for child-, girl-, and women-friendly centers provide areas/space for SRH-related activities for adolescent girls
- Advocate for social workers/other protection staff trained on counseling adolescent survivors of GBV to be placed at health facility
- Work with organizations who manage safe spaces to collect information on barriers to health services for adolescents at increased risk (eg adolescent survivors of GBV, adolescents selling or exchanging sex for other goods or services, etc)
- Advocate for MHPSS services to be available for adolescents formerly associated with armed groups and adolescents who formerly perpetrated GBV

Annex C: Sample ASRH Project Proposal for YLOs

This is a proposal guide used for a rapid response mechanism in 2020 from IAWG, which was funded by the Ministry of Foreign Affairs Netherlands and managed by Save the Children International. The guide has modified this application into an annexed tool for YLOs to view and use for future proposals, as well as developed a sample budget that aligns with this example proposal (see Annex D). The guide has omitted the beginning portion of this application (which explained the due dates and background information of this rapid response mechanism) so that the tool can be used and adapted for other ASRH opportunities YLOs may choose to pursue. The guide provides guidance and examples of what to include in different sections of the application template using fictitious information about a YLO for illustrative purposes.

Sample Application Form Template, Adapted from Save the Children Rapid Response Mechanism for Youth Organizations

Please fill out the grey cells below.

1. Your organization	
a. Organization name	[insert organization name]
b. Where your organization works (please specify if you work in any areas with refugee populations)	[insert where your organization works]
c. Contact & organization information	[complete contact information within this section] Name: Title: Email: Skype: Tel.: Twitter Handle: Website: Facebook Page: Physical address:

- d. Please tell us more about your organization's commitment towards young people, in particular regarding SRHR. If your organization has an official mission statement, please share it with us.

[The donor/implementation partner wants to see that your YLO has a specific mission to working with young people and has completed projects or programs to address SRHR issues affecting adolescents and youth. It is important to review and edit all sections before submission – responses to the question prompts are not the only items the reviewer is judging your application on]

Sample text from imaginary YLO:

Imaginarica is a youth-led organization dedicated to advocating for all young people to have access to the services they need to lead healthy lives. This includes outreach activities to educate adolescents and youth on where to access sexual and reproductive health services, working with health facilities to train their staff on how to make their services more adolescent-friendly, and participating in coordination meetings with other organizations to represent young people's voices and perspectives in [insert emergency context]. Our organization has been working with young people and in [insert emergency context] for 10 years. We have built strong relationships with adolescents and youth, as well as community members and other health organizations working in our area.

- e. Are you a youth-led organization?

[complete the required section and explanation text]

☐ Yes ☐ No

If you answered yes, please tell us more about your organization's leader(s) and organization members (including name, title, age, background). Please do not exceed 5 sentences.

[Type here]

Note: If you answered "No," your organization is not eligible to apply.

- f. How did you hear about this opportunity?

[complete section]

- g.** Please provide the name, title, and email address of a **reference person** (i.e. an external person willing to talk to us about your organization's work, experience, and capacity).

[complete section and ensure you have received approval from the reference person prior to submitting application]

Name:

Title:

Email:

- h.** Last financial year, what was your organization's total income (grants and other sources), in US\$?

[complete section]

US\$

2. Your project idea

- a.** What is the estimated requested funding amount for your proposed project (in US\$)?

[complete section – be sure to carefully read all application instructions and restrictions for the funding request]

US\$

- b.** What is the proposed timeframe of this project?

[complete section – be sure to carefully read all application instructions regarding timeline of project]

From MM/DD/YYYY to MM/DD/YYYY

- c.** What is the specific problem addressed by this project?

[describe the problem your proposed project aims to address]

Sample text:

The specific problem our youth-led organization aims to address from [insert emergency context] is access, availability, and use of sexual and reproductive health information and services for young people.

- d. What are the causes and consequences of this problem?

[provide specific reasons why the problems you described above are happening, in your organization's experience/ the data your organization has concerning this issue]

Sample text:

Adolescents and youth do not feel comfortable accessing the health clinic in [insert name of refugee settlement]. We facilitated several focus group discussions with young people, and they have told us that health staff are not welcoming to them when they come to the clinic, particularly if they are asking the health staff for sexual and reproductive health services. They also said that community members judge them for going to the family planning office of the health clinic and tell other people if they see them visiting the clinic for these services.

These issues have led to young people not seeking or receiving sexual and reproductive health services they need, which has increased their needs and negatively impacted their lives. This includes unwanted pregnancies, increased transmission of sexually transmitted infections, and high-risk pregnancies and deliveries for adolescent girls. For example, one adolescent reported that they did not receive emergency contraception in time and it resulted in her having an unwanted pregnancy.

- e. Why is it critical to address this issue during Covid-19? What will happen if we don't act NOW?

[explain why your proposed activities will address the specific issue described in the call for applications]

Sample text:

This project is critical to address during Covid-19 because the pandemic has increased SRH needs and barriers for young people in [insert emergency context].

Young people face additional barriers to accessing the SRH services they need because health workers are prioritizing patients with COVID-19 symptoms and patients requesting other services must wait. The lockdown placed on [insert refugee settlement] has also affected supplies at the health facility. When young people are able to see a nurse for contraception, the nurse tells them that they are out of the contraceptive method the young person requests.

Financial barriers have also affected young people. Their parents are unable to go to work during the lockdown and the cash-for-health vouchers provided by the UN agencies in [insert refugee settlement] do not allow for young people to use the vouchers for SRH services. Young people urgently need access to condoms and other types of contraception to prevent unwanted pregnancies and transmission of sexually transmitted infections.

- f. What specific change(s) do you expect to come from this proposed project?

[provide direct outcomes you anticipate as a result of your project here – for instance, change in attitudes, change in accessibility, etc.]

Sample text:

By the end of the project, young people will feel comfortable seeking SRH services at the health clinic due to a welcoming environment from staff and adaptations made to the clinic operations to provide more adolescent- and youth-friendly services. This project will work with UN agencies to advocate for inclusion of SRH services within the cash-for-health voucher provision, as well as increased prioritization of SRH commodities for restocking health facility supplies. All of these outcomes will result in increased use of SRH services and commodities by young people in [insert emergency context] and a decrease in sexually transmitted infections and unwanted pregnancies among young people.

- g. Please briefly describe below the main activities you plan to implement during this project.

Help us understand the strategy behind your proposed activities: avoid acronyms and jargon, and be clear and practical. Someone without any knowledge of your local context should be able to understand what you write.

Activity 1:

[insert your first proposed activity]

Sample text: Conduct assessment of health clinic using adolescent-friendly checklist from ASRH Toolkit for Humanitarian Settings: 2020 Edition to determine areas to enhance services for young people. Use results from this assessment to make recommendations for the clinic, such as changing the location of the family planning counselling room, which is currently located by the reception desk.

Activity 2:

[insert your second proposed activity]

Sample text: Conduct training with health workers on providing adolescent-friendly SRH services. This will include facilitating Values Clarification and Attitudes Transformation exercises with health staff, as well as role-playing simulations to help health workers understand the concerns of young people and how they can help to address them. Our organization will work with other health partners in [insert humanitarian emergency] to coordinate the training.

- h. Give one example of a (current or past) project which demonstrates your capacity to carry out these proposed activities successfully.

[complete section with one example that demonstrates how your organization successfully implemented a project or activities like the ones you are proposing in your application]

Sample text: Our youth-led organization has implemented several SRH projects with different donors. Our most recent project with UNFPA, which took place from September 2019 to April 2020, focused on working with community health workers to distribute SRH information to young people in [insert emergency context]. With this project, our youth-led organization also provided condoms to young people at different outreach events and supported consultations with community health workers to improve their attitudes towards young people receiving SRH information and services. Our organization received \$12,000 for this project and completed all activities within the timeframe. By the end of the project, our organization reached 500 adolescents and youth with SRH information through different outreach activities, in coordination with community health workers. We provided condoms to 350 adolescents and youth through distribution events. Finally, we saw a positive change in attitudes from community health workers from the start to the end of the project, according to after-action review interviews conducted at the close of the project.

- i. Where will your project activities take place?

[insert where the activities will take place, providing specific names of regions/districts and why you chose those specific areas]

3. Checklist

Does your organization have official registration documents?

☐

Does your organization have a bank account under its name?

☐

Annex D: Sample Budget for ASRH Program for YLOs

This is a sample budget based upon the activities listed in Annex C: Sample ASRH Project Proposal. The guide provides some sample inputs for the types of costs that could be included as part of an ASRH project for a YLO. For the first table of the budget, the salaries include the percentage of the person's time that will be spent on the project. Your organization should aim to not have all of your staffs' time spent entirely on one project to ensure sustainability of your organization. Similarly, under office costs and transportation, the guide included percent allocated for those costs, which should reflect a portion of the total costs your organization thinks will be spent on those routine costs as a result of this project. The fringe benefit line is to help your organization think about how to provide benefits to your employees, such as vacation and sick days. The numbers provided in all sections of the sample budget are for illustrative purposes only. Your organization should download and adapt the tool to fit your proposal needs.

Budget item	Monthly Salary	# of months	Quantity	% of time per month	Total cost
1. Staffing costs					
Project Manager	1200	12	1	40%	5,760
Financial officer	800	12	1	40%	3,840
Monitoring & Evaluation officer	600	12	1	30%	2,160
SRH program staff	450	12	5	60%	16,200
Youth volunteer supervisor	450	12	1	100%	5,400
Youth volunteers	200	6	20	100%	24,000
Fringe Benefits (10%)	5,736 [add up costs from all salary lines and multiple cost by 10%]				
Total	63,096				
[Total in donor currency]	[convert total into currency of donor organization]				

Budget item	Quantity	Unit Cost	Local currency	[Currency of donor]
1. Equipment				
Laptop computer	2	2500	5,000	[convert to donor currency]
Camera	1	500	500	[convert to donor currency]
Printer	1	800	800	[convert to donor currency]
Total	6,300	[convert to donor currency]		

Budget item	# of months	Cost/month	% allocation	Local currency	[Currency of donor]
1. Office Expenses					
Office rent	12	750	20%	1,800	[convert to donor currency]
Office supplies (paper, printer ink, etc.)	12	150	10%	180	[convert to donor currency]
Phone & internet costs	12	200	10%	240	[convert to donor currency]
Total	2,220	[convert to donor currency]			

Budget item	# of months	Cost/month	% allocation	Local currency	[Currency of donor]
1. Transportation					
Car rental	6	4,000	20%	4,800	[convert to donor currency]
Car fuel	6	2,000	20%	2,400	[convert to donor currency]
Total	7,200	[convert to donor currency]			

Budget item	Quantity	Frequency	Unit Cost	Local currency	[Currency of donor]
1. Supplies, Materials & Other Direct Costs					
Printing of srh information, education, and communication materials	250 materials	6 months	10 per IEC printed material	15,000	[convert to donor currency]
Venue costs for health worker training	1 room	3 days	250	750	[convert to donor currency]
Refreshment costs for health worker training	20 staff	3 days	20 per person for refreshments	1,200	[convert to donor currency]
Phone cards for youth volunteers	20 cards	12 months	100	24,000	[convert to donor currency]
Total	40,950				[convert to donor currency]
Total of entire project	119,766				[convert to donor currency]



Photo: Save the Children

RESOURCE TABLE



The table below highlights a list of resources that are especially relevant to YLOs and youth-serving organizations working on ASRH in humanitarian settings. The name, link and description of each resource is included, as well as the chapter of the YLO guide that it links to. The 2020 ASRH Toolkit includes a more extensive list of resources that may be useful.

Chapter and sub-section of guide	Name of resource	Link to resource	Description of resource
All chapters	IAWG. (2020). ASRH Toolkit 2020 edition.	https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition	The 2020 ASRH Toolkit provides strategies and tools to help humanitarian organizations prioritize and implement effective programs to address and fulfill adolescents' SRH and rights. The 2020 edition is an update of the first edition published in 2009.
About the Guide, section on Why was the guide developed (IAFM)	IAWG. (2018). Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings.	https://iawgfieldmanual.com/manual	The IAFM is the result of a collaborative and consultative process engaging hundreds of representatives from UN agencies and NGOs that make up IAWG. The IAFM continues to be the authoritative source for SRH in crises.
About the Guide, section on Why was the guide developed (MISP)	IAWG. (2018). Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings (Chapter 3: MISP).	https://iawgfieldmanual.com/manual/misp	The IAFM is the result of a collaborative and consultative process engaging hundreds of representatives from UN agencies and NGOs that make up IAWG. The IAFM continues to be the authoritative source for SRH in crises.
About the Guide, section on Terminology (Ready to Save Lives Toolkit)	FP2030 & IAWG (2020). Ready to Save Lives Toolkit.	https://fp2030.org/srh-toolkit	The purpose of the Ready to Save Lives Toolkit is to bring together existing learning and guidance as a starting point for stakeholders to begin SRH preparedness work.
About the Guide, section on Terminology (CHOICE for Youth and Sexuality glossary)	CHOICE for Youth and Sexuality (2023). Glossary of terms.	https://www.youthdoit.org/srhr-language/	CHOICE for Youth and Sexuality provides a glossary of SRHR language on their website.

Chapter 1: ASRHR in Emergencies 101, section on Unique needs of adolescents and youth in humanitarian settings (subgroups of adolescents and youth)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-1-introduction>

The ASRH Toolkit provides a list of subgroups of adolescents and youth that are at increased risk of poor SRH outcomes due to specific and/or overlapping characteristics and risk factors. This list of subgroups is included in Chapter 1: Introduction, Figure B (page 22).

Chapter 1: ASRHR in Emergencies 101, section on Unique needs of adolescents and youth in humanitarian settings (Social Ecological Model)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-1-introduction>

The ASRH Toolkit explains the Social-Ecological Model, including examples from each sphere of the model in Chapter 1: Introduction, Figure C (pages 25-27).

Chapter 1: ASRHR in Emergencies 101, section on Understanding the humanitarian architecture (Global Health Cluster SRH Task Team)

WHO. (2022). Sexual and Reproductive Health Task Team.

<https://healthcluster.who.int/our-work/task-teams/sexual-and-reproductive-health-task-team>

The Global Health Cluster SRH Task Team has been established to ensure SRH priorities are systematically addressed in all phases of humanitarian response and that SRH coordination is consistently included in cluster coordination at both the global and country levels.

Chapter 1: ASRHR in Emergencies 101, section on Adolescent-inclusive MISP (MISP)

IAWG. (2018). Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings (Chapter 3: MISP).

<https://iawgfieldmanual.com/manual/misp>

The IAFM is the result of a collaborative and consultative process engaging hundreds of representatives from UN agencies and NGOs that make up IAWG. The IAFM continues to be the authoritative source for SRH in crises.

Chapter 1: ASRHR in Emergencies 101, section on Adolescent-Inclusive MISP (Sphere standards)

Sphere Minimum Standards in Humanitarian Response

<https://www.spherestandards.org/>

The Sphere standards are a set of principles and minimum humanitarian standards in technical areas of humanitarian response. They are the most widely recognized humanitarian standards globally.

Chapter 1: ASRHR in Emergencies 101, section on Adolescent-Inclusive MISP (core humanitarian principles)

European Civil Protection and Humanitarian Aid Operations. (2023). Humanitarian principles.

https://civil-protection-humanitarian-aid.ec.europa.eu/who/humanitarian-principles_en

The European Civil Protection and Humanitarian Aid Operations outlines the key humanitarian principles, which are endorsed by 2 UN General Assembly resolutions (46/182 and 58/114).

Chapter 1: ASRHR in Emergencies 101, section on Adolescent-Inclusive MISP, Table 1 (service mapping tool)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57725>

The ASRH Toolkit provides a tool (Annex G) referenced in the Facility Quality Improvement Tools section of Chapter 6: ASRH Services & Interventions. This tool provides an example and notes on how to fill out an SRH service mapping tool adapted from Women's Refugee Commission. This tool is also available in a Word document format so that your YLO can edit and adapt it however you like.

Chapter 1: ASRHR in Emergencies 101, section on Providing adolescent- and youth-friendly services (WHO guidance)

WHO. (2012). Making health services adolescent friendly.

<https://www.who.int/publications/i/item/9789241503594>

This guidebook sets out the public health rationale for making it easier for adolescents to obtain the health services that they need to protect and improve their health and well-being, including sexual and reproductive health services. It defines 'adolescent-friendly health services' from the perspective of quality, and provides step-by-step guidance on developing quality standards for health service provision to adolescents.

Chapter 1: ASRHR in Emergencies 101, section on Providing adolescent- and youth-friendly services (Table 5 of ASRH Toolkit)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57660>

The ASRH Toolkit provides a table of how to apply the five principles of adolescent-friendly services to humanitarian settings. This information is included in Table 5 of the ASRH Toolkit (pages 75-80).

Chapter 1: ASRHR in Emergencies 101, section on Providing adolescent- and youth-friendly services (referral forms)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit provides guidance on referral mechanisms, as well as several sample forms, including the WHO referral form (Annex F, page 204-205), referring agency form (Annex N, pages 233-234), client form (Annex NN, pages 235-236), and receiving agency form (Annex NNN, pages 237-238). Annexes N, NN, and NNN are also available in a Word document formats so that your YLO can edit and adapt it however you like.

Chapter 1: ASRHR in Emergencies 101, section on Adopting a holistic lens in ASRH programming (multi-sectoral tool)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57689>

The ASRH Toolkit developed a multi-sectoral tool to identify ways to integrate ASRH activities across all humanitarian sectors. This tool is provided in Annex M of the Toolkit (pages 226-232). This tool is also available in a Word document format so that your YLO can edit and adapt it however you like.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Implementing community-based programs (mapping SRH services)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57725>

The ASRH Toolkit provides a tool (Annex G) referenced in the Facility Quality Improvement Tools section of Chapter 6: ASRH Services & Interventions. This tool provides an example and notes on how to fill out an SRH service mapping tool adapted from Women's Refugee Commission. This tool is also available in a Word document format so that your YLO can edit and adapt them however you like.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Implementing community-based programs (communications, media, and technology)

Chapter 2: Supporting ASRH services in humanitarian settings, section on Implementing community-based programs (adolescents as first responders)

Chapter 2: Supporting ASRH services in humanitarian settings, section on Implementing community-based programs (community health)

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (checklist)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit provides guidance and examples of using communications, media, and technology approaches and tools in Chapter 6 of the Toolkit (pages 126-127).

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit provides guidance and examples of how to utilize young people as first responders in Chapter 6 of the Toolkit (pages 119-121).

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit provides guidance and examples of community health approaches and tools in Chapter 6 of the Toolkit (pages 124-126).

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57718> (how-to guide)

<https://iawg.net/index.php?p=actions/asset-count/count&id=57717> (checklist)

The ASRH Toolkit developed a checklist for creating and/or monitoring a health facility to establish and/or assess if its services are adolescent and youth friendly. Annex H and I of the Toolkit provides the how-to use the checklist tool and the actual tool itself, respectively (Annex H: pages 208-209; Annex I: pages 210-217). These tools are also available in a Word document formats so that your YLO can edit and adapt them however you like.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (training guidance)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit has an entire subsection dedicated to Training and Capacity Building Staff in Chapter 6 (beginning on page 82). This subsection provides guidance, tools, and links to additional resources for training and capacity building.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (training slidedecks)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://drive.google.com/drive/folders/1-axVqrfpzsP2EKRhd1gVCzh5jJ4PQpqq?usp=sharing> (SRH managers)

<https://drive.google.com/drive/folders/1Nt6G23go70GU7-tFOWfX4DeE4ONtgeOb?usp=sharing> (Frontline workers)

The IAWG ASRHR SWG developed slidedecks for several audiences, including SRH managers, frontline workers, and non-health staff. These are available on the IAWG ASRHR SWG Google Drive, along with all of the materials required to conduct the training.

https://drive.google.com/drive/folders/1-QpIpZ71_zFDNhHmLlunwgrWkeYzoal?usp=drive_link (Non-health staff)

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (ASRHR coordinator job description)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57699>

The ASRH Toolkit provides a sample job description tool (Annex S) and is referenced in the Staff Recruitment, Support, and Responsibilities subsection of Chapter 8: Manager Guidance & Tools. This is a sample job description for an ASRHR coordinator. This tool is also available in a Word document format so that your YLO can edit and adapt them however you like.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (onboarding plan)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57707>

The ASRH Toolkit provides an onboarding tool (Annex T) and is referenced in the Staff Recruitment, Support, and Responsibilities subsection of Chapter 8: Manager Guidance & Tools. The IAWG ASRHR SWG collated a compendium of highly used resources in month one of the onboarding plan, but staff may refer to resources in later months, as needed for their work and responsibilities. This tool is also available in a Word document format so that your YLO can edit and adapt them however you like.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (sample VCAT exercise)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57729>

The ASRH Toolkit provides a sample VCAT tool (Annex E). This tool is referenced in the Tools for Clarifying Values subsection of Chapter 6: ASRH Services & Interventions. VCAT activities and workshops can be conducted with wide range of stakeholders in various training formats and meetings. You may adapt this VCAT activity to reflect the contexts of any humanitarian setting and refer to Ipas' VCAT toolkits for additional VCAT activities. This tool is also available in a Word document format so that your YLO can edit and adapt them however you like.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (intersectionality & sexuality)

RHRN2. (2023). Intersectionality Training.

<https://rhrn2.com/intersectionality-training>

This training is a workshop on value clarification around intersectionality and sexuality to empower diverse young people to become effective advocates for social change around young people's SRHR.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (Five Principles for Creating Trustful Atmosphere for Adolescent Counseling)

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (referral forms)

Chapter 2: Supporting ASRH services in humanitarian settings, section on Supporting facility-based services (other health service delivery options)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57670>

Save the Children—in consultation with the IAWG ASRH Sub-Working Group—developed a list of five principles for staff to use to create a trustful atmosphere in counseling adolescents. These principles are included in the ASRH Toolkit as a separate downloadable tool (also available on pages 109-113).

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit provides guidance on referral mechanisms, as well as several sample forms, including the WHO referral form (Annex F, page 204-205), referring agency form (Annex N, pages 233-234), client form (Annex NN, pages 235-236), and receiving agency form (Annex NNN, pages 237-238). Annexes N, NN, and NNN are also available in a Word document formats so that your YLO can edit and adapt it however you like.

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit has a subsection dedicated to other service delivery options, including mobile health clinics, telemedicine, and self-care, in Chapter 6 (beginning on page 102). This subsection provides guidance, tools, and case studies for these other delivery methods.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Self-care (IAWG and IRC report)

IAWG and IRC. (2023). Self-Care for Sexual and Reproductive Health in Humanitarian and Fragile Settings: Barriers, Opportunities and Lessons Learned

<https://iawg.net/resources/self-care-srh-humanitarian-fragile-settings-barriers-opportunities-and-lessons-learned>

This report synthesizes findings and lessons learned from interviews conducted with leading experts working on self-care and SRHR in humanitarian, fragile and stable settings, including program implementers, researchers, donors and more.

Chapter 2: Supporting ASRH services in humanitarian settings, section on Self-care (SSHINE Lab's advocacy video)

SSHINE Lab. (2019). Self-Care Interventions in Humanitarian Settings

<https://www.youtube.com/watch?v=572HLZGXMV>

This short video highlights an article on self-care interventions as a way to make sexual and reproductive healthcare available to more people living in humanitarian settings.

Chapter 3: Mobilizing and Sustaining Engagement, section on Meaningful and ethical participation (guidance)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit has a subsection dedicated to how to engage youth as first responders in Chapter 6 (beginning on page 120). This subsection provides guidance, best practices, and tools.

Chapter 3: Mobilizing and Sustaining Engagement, section on Meaningful and ethical participation (Flower of Participation)

CHOICE for Youth and Sexuality and YouAct. (2017). Flower of Participation.

<https://www.youthdoit.org/assets/Uploads/20171122-Flower-of-Participation-Narrative.pdf>

The Flower of Participation is a tool that uses the metaphor of a blooming flower to describe the different forms of meaningful youth participation and how meaningful youth participation can grow and flourish. The flower figure is based on the theory of the 'Ladder of Participation,' as developed by Roger Hart. (Roger Hart, Children's Participation – From Tokenism to Citizenship, UNICEF, 1992).

Chapter 3: Mobilizing and Sustaining Engagement, section on Meaningful and ethical participation (UN Committee on the Rights of the Child)

UN Convention on the Rights of the Child. (2009). UN Committee on the Rights of the Child.

<https://www2.ohchr.org/english/bodies/crc/docs/advanceversions/crc-c-gc-12.pdf>

Article 12 of the Convention on the Rights of the Child (CRC)—the child's right to be heard—is the fundamental tenet for children's participation. As one of the four guiding principles of the Convention, Article 12 is both connected to and indivisible from all other rights enshrined in the Convention. There are additional articles that specifically intersect with Article 12 and directly help to define the meaningful participation of children.

Chapter 3: Mobilizing and Sustaining Engagement, section on Meaningful and ethical participation (Core Humanitarian Standard on Quality and Accountability)

CHS Alliance, Group URD, & Sphere Project. (2014). Core Humanitarian Standard on Quality and Accountability.

<https://corehumanitarianstandard.org/the-standard>

The CHS sets out nine commitments that organizations can – and should – make to people affected by crises or situations of vulnerability to deliver quality, effective and accountable support and assistance. The CHS is currently being revised, with draft 1 of the revision available.

Chapter 3: Mobilizing and Sustaining Engagement, section on Meaningful and ethical participation (best practices)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit has a subsection dedicated to how to engage youth as first responders in Chapter 6 (beginning on page 120). This subsection provides guidance, best practices, and tools.

Chapter 3: Mobilizing and Sustaining Engagement, section on Ensuring Sustainability (step-by-step guide)

A Step-by-Step Guide to Creating Sustainable Youth-Led Organizations Working on Sexual and Reproductive Health and Rights

https://www.youthpower.org/sites/default/files/YouthPower/files/resources/YouthGuide_final.pdf

This guide provides guidance on building a sustainable youth-led SRH organization, examining key lessons learned related to ensuring the sustainability of a youth-led SRH organization, and overcoming challenges faced by a youth-led organization.

Chapter 4: Equitable and Sustainable Partnerships, section on Principles of equitable and sustainable partnerships for YLOs [We Trust Youth(th) Initiative's recommendations]

We Trust You(th).
Recommended Actions

https://www.wetrustyouth.org/_files/ugd/58ac5e_23490c2e5ae943d491322eebdb9141e9.pdf

We Trust You(th) developed recommendations based off of a workshop completed in 2022 with donors, youth-led organizations, and others to help youth focused donors and iNGOs take necessary steps to tackle practical problems that result from systemic inequities that currently thrive within relationships between youth-led organizations and youth-focused donors and international organizations.

Chapter 4: Equitable and Sustainable Partnerships, section on Principles of equitable and sustainable partnerships for YLOs (CHOICE for Youth and Sexuality Toolkit)

CHOICE for Youth and Sexuality. (2019). Investing in youth impact: a toolkit on funding for Youth-Led Organizations.

<https://www.youthdoit.org/assets/Uploads/CFY-Investinginyouthimpact.pdf>

This toolkit is for youth-led organizations learning how to fundraise, as well as for youth-serving organizations working with youth-led organizations to understand the issues faced by their partners/grantees.

Chapter 5: Data for Impact, section on Needs assessment (DOs and DON'Ts)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has a list of do's and don'ts for conducting assessments with adolescents in Chapter 7 (starting on page 143).

Chapter 5: Data for Impact, section on Needs assessment (Checklist for conducting assessments)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has a checklist for conducting assessments with adolescents in Chapter 7 (page 141).

Chapter 5: Data for Impact, section on Needs assessment (Links to tools)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has an entire table dedicated to ASRH assessments. Table 6 (beginning on page 147 in Chapter 7) provides information on when you can use these different assessments throughout different phases of the program and humanitarian cycle, how to involve adolescents in different assessments, and examples and tools to consult when using the assessments. It includes several participatory methodologies as well, including body and participatory mapping, ranking exercises, score cards, transect walks, and storytelling.

Chapter 5: Data for Impact, section on Needs assessment (Examples of data to use)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has a list of standardized SRH indicators in Chapter 7 (page 165).

Chapter 5: Data for Impact, section on Needs assessment (sample logical framework)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57678>

The ASRH Toolkit has a sample logical framework in Chapter 7 (page 162-163).

Chapter 5: Data for Impact, section on Needs assessment (guidelines for theory of change)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has guidelines for developing a theory of change in Chapter 7 (beginning on page 160).

Chapter 5: Data for Impact, section on Monitoring and analysis (list of recommended indicators)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has a list of standardized SRH indicators in Chapter 7 (page 165).

Chapter 5: Data for Impact, section on Monitoring and analysis (Data collection methods and tools)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has an entire table dedicated to ASRH assessments. Table 6 (beginning on page 147 in Chapter 7) provides information on when you can use these different assessments throughout different phases of the program and humanitarian cycle, how to involve adolescents in different assessments, and examples and tools to consult when using the assessments. It includes several participatory methodologies as well, including body and participatory mapping, ranking exercises, score cards, transect walks, and storytelling.

Chapter 5: Data for Impact, section on Monitoring and analysis (Data analysis methods and tools)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has a section on Implementation and Monitoring (beginning on page 165) in Chapter 7 that discusses data analysis, common barriers to monitoring and analysis, what your organization should be tracking with ASRH data, and how to use this data for impact.

Chapter 5: Data for Impact, section on Learning (UNICEF Knowledge Exchange Toolbox)

UNICEF. (2015). UNICEF Knowledge Exchange Toolbox

<https://knowledge.unasipacific.org/our-work/knowledge-resources/unicef-knowledge-exchange-toolbox>

This Toolbox was created to help UNICEF staff and partners to plan and implement successful knowledge sharing events.

Chapter 5: Data for Impact, section on Learning and evaluation (Components of an evaluation protocol)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has guidance on developing an evaluation protocol in Chapter 7 (beginning on page 172).

Chapter 5: Data for Impact, section on Learning and evaluation (Meaningful engagement of adolescents in evaluations)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has guidance on how to involve adolescents in evaluations in Chapter 7 (beginning on page 172).

Chapter 5: Data for Impact, section on Learning and evaluation (Evaluation criteria)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-7-data-for-action>

The ASRH Toolkit has guidance on what evaluation criteria is recommended in Chapter 7 (beginning on page 173).

Chapter 5: Data for Impact, section on Learning and evaluation (ACAPS and Emergency Capacity Building Project guide)

ACAPS. (2014). Humanitarian Needs Assessment - The Good Enough Guide.

<https://reliefweb.int/report/world/humanitarian-needs-assessment-good-enough-guide-0>

ACAPS and the Emergency Capacity Building Project produced this guide as a practical resource to needs assessments in humanitarian response. It pulls together the main lessons learned from various humanitarian initiatives and experiences.

Chapter 5: Data for Impact, section on Learning and evaluation (CHOICE toolkit)

CHOICE for Youth and Sexuality.

https://www.youthdoit.org/assets/CHOICE_PMEI_Toolkit.pdf

CHOICE for Youth and Sexuality created a toolkit for YLOs to use for planning, monitoring, evaluation, and learning.

Chapter 5: Data for Impact, section on Learning and evaluation (Research-to-Change Toolkit)

Youth Excel: Our Knowledge, Leading Change. (2022). Research-to-Change (R2C) Toolkit for youth research.

<https://www.youthpower.org/resources/youth-excels-research-change-toolkit>

This youth-inclusive toolkit offers a step-by-step process to planning and carrying out research and using findings for concrete action.

Chapter 6: Operating at High Quality, section on Minimum Operational Requirements (Advancing Partners & Communities OCA tool)

Advancing Partners & Communities. Organizational Capacity Assessment (OCA) Tool.

<https://www.advancingpartners.org/resources/organizational-capacity-assessment-oca-tool>

The Organizational Capacity Assessment (OCA) tool is designed to measure the overall capacity of an organization. It assesses capability in five key areas: governance, organizational management, program management, human resources management, and financial management.

Chapter 6: Operating at High Quality, section on Operational readiness (Advancing Partners & Communities OCA tool)

Advancing Partners & Communities. (2012). Organizational Capacity Assessment (OCA) Tool

<https://www.advancingpartners.org/resources/organizational-capacity-assessment-oca-tool>

The Organizational Capacity Assessment (OCA) tool is designed to measure the overall capacity of an organization. It assesses capability in five key areas: governance, organizational management, program management, human resources management, and financial management. The results are compiled into an agreed-upon action plan that maps priority areas and actions that the organization will take to address problems and gaps.

Chapter 6: Operating at High Quality, section on Expanding your reach (ASRH Toolkit)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-6-asrh-services-interventions>

The ASRH Toolkit provides guidance and examples of using communications, media, and technology approaches and tools in Chapter 6 of the Toolkit (pages 126-127).

Chapter 6: Operating at High Quality, section on Training and skill building (ASRHR Coordinator job description)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/index.php?p=actions/asset-count/count&id=57699>

The ASRH Toolkit provides a sample job description tool (Annex S) and is referenced in the Staff Recruitment, Support, and Responsibilities subsection of Chapter 8: Manager Guidance & Tools This is a sample job description for an ASRHR coordinator. This tool is also available in a Word document format so that your YLO can edit and adapt them however you like.

Chapter 6: Operating at High Quality, section on Training and skill building (training tools)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://drive.google.com/drive/folders/1-axVqrfpzsP2EKRhd1gVCzh5jJ4PQpqq?usp=sharing> (SRH managers)

<https://drive.google.com/drive/folders/1Nt6G23go70GU7-tF0WfX4DeE4ONtgeOb?usp=sharing> (Frontline workers)

https://drive.google.com/drive/folders/1-QplpZ71_zFDNhHmLlunwgrWkeYzoal?usp=drive_link (Non-health staff)

The IAWG ASRHR SWG developed slidedecks for several audiences, including SRH managers, frontline workers, and non-health staff. These are available on the IAWG ASRHR SWG Google Drive, along with all of the materials required to conduct the training.

Chapter 6: Operating at High Quality, section on Resource Mobilization

The Grand Bargain

<https://interagencystandingcommittee.org/content/grand-bargain-hosted-iasc>

The Grand Bargain is a unique agreement between some of the largest donors and humanitarian organizations who have committed to improve the effectiveness and efficiency of the humanitarian action, in order to get more means into the hands of people in need.

Chapter 6: Operating at High Quality, section on Resource Mobilization (Investing in Youth impact: A toolkit on funding for Youth-led Organisations)

CHOICE for Youth and Sexuality. (2019). Investing in youth impact: a toolkit on funding for Youth-Led Organizations.

<https://www.youthdoit.org/assets/Uploads/CFY-Investinginyouthimpact.pdf>

This toolkit is for youth-led organizations learning how to fundraise, as well as for youth-serving organizations working with youth-led organizations to understand the issues faced by their partners/grantees.

Chapter 6: Operating at High Quality, section on Resource Mobilization (resource mobilization)

IAWG. (2020). ASRH Toolkit 2020 edition.

<https://iawg.net/resources/adolescent-sexual-and-reproductive-health-asrhtoolkit-for-humanitarian-settings-2020-edition/chapter-8-manager-guidance-notes-tools>

The ASRH Toolkit has an entire subsection dedicated to resource mobilization for ASRH in emergencies in Chapter 8 (beginning on page 184).

Chapter 6: Operating at High Quality, section on Resource Mobilization (free proposal development online course)

Other useful resources to YLOs working ASRH in emergencies

Aga Khan Foundation, The Learning Hub. Proposal Development.

<https://akflearninghub.org/courses/civil-society/proposal-development-global/>

This free online course is aimed at civil society organization staff seeking the strengthen their proposal development skills in response to international donors including the United States and United Kingdom governments and the European Commission.

IAWG. (2020). Checklist for Monitoring Implementation of the Minimum Initial Service Package (MISP) for Sexual and Reproductive Health (SRH).

<https://iawg.net/resources/misp-implementation-checklist>

The MISP checklist is for monitoring service provision in humanitarian settings.

IASC. (2020). With us & for us: Working with and for Young People in Humanitarian and Protracted Crises. UNICEF and NRC for the Compact for Young People in Humanitarian Action.

<https://interagencystandingcommittee.org/events/iasc-guidelines-working-and-young-people-humanitarian-and-protracted-crises>

These IASC guidelines were created in response to Action 1: Services in the Compact for Young People in Humanitarian Action. The aim of these guidelines is to serve as the 'go-to' guide for working with and for young people in humanitarian settings and protracted crises.

Partnership for Maternal Newborn and Child Health. (2022). Practical Guidance Resource to Operationalize the Global Consensus Statement on Meaningful Adolescent and Youth Engagement (MAYE).

[https://pmnch.who.int/resources/publications/m/item/practical-guidance-resource-to-operationalize-the-global-consensus-statement-on-meaningful-adolescent-and-youth-engagement-\(maye\)](https://pmnch.who.int/resources/publications/m/item/practical-guidance-resource-to-operationalize-the-global-consensus-statement-on-meaningful-adolescent-and-youth-engagement-(maye))

This document aims to guide different stakeholders towards the highest standards of meaningful adolescent and youth engagement.

Youth Coalition for Sexual and Reproductive Rights

<https://www.youthcoalition.org/>

An international organization of young people committed to promoting adolescent and youth sexual and reproductive rights at the national, regional, and international levels

WHO

<https://www.who.int/>

WHO provides a wide range of resources, including guidelines, toolkits, and reports on ASRH.

UNFPA	https://www.unfpa.org/	UNFPA focuses on reproductive health and rights, including ASRH.
UN Children's Fund	https://www.unicef.org	UNICEF focuses on child and adolescent health, including ASRH.
Guttmacher Institute	https://www.guttmacher.org/	The Guttmacher Institute conducts research and provides evidence-based information on sexual and reproductive health.
Centers for Disease Control and Prevention	https://www.cdc.gov/healthyouth/index.htm	The CDC has a dedicated section on adolescent and school health, which includes resources on sexual health education and tools for practitioners.
International Planned Parenthood Federation	https://www.ippf.org/	IPPF is a global organization working on sexual and reproductive health and rights. They provide resources, toolkits, and guidance on ASRH.
MSI Reproductive Choices	https://www.msichoices.org/	MSI is a global organization providing contraception and safe abortion services around the world.



Inter-Agency Working Group on
Reproductive Health in Crises