

with the correct information, awareness of their rights and ability to make decisions to exercise their choice, take charge of their own lives, and contribute to the country's progress. PFI has turned its focus towards adolescents and youth across programmes, by putting information and services related to sexual and reproductive health within their reach, directly and through partnerships with government, civil society organisations and youth led organisations.

It is recognised globally that focussing on the world's adolescents and youth as an important demographic group is key to achieving the Sustainable Development Goals 2030. At 241 million⁵, India has the largest adolescent and youth population (15-24 years) in the world. Appropriately, India was host to the 11th World Congress of the International Association for Adolescent Health (IAAH) in October 2017. As member of the Steering Committee, PFI contributed significantly in shaping the contours of the World Congress. It was an opportunity for us to gather learnings, forge partnerships and present our work with adolescents.

The running strand across sessions at the World Congress was sexual and reproductive health and comprehensive sexuality

education. The Ministry of Health and Family Welfare presented highlights of Rashtriya Kishor Swasthya Karyakram (RKSK), India's adolescent health programme begun in 2014. The Ministry acknowledged the need for increased political commitment, enhanced resource allocation, greater media engagement, community sensitisation, and enhanced convergence with the stakeholder ministries as the way forward for adolescent sexual and reproductive health. PFI showcased **Saathiya** in the poster presentations section, the identity and resource toolkit developed in partnership with the United Nations Population Fund (UNFPA) for peer educators (PE) of the Government of India's adolescent health programme Rashtriya Kishor Swasthya Karyakram (RKSK).

⁵ United Nations World Population Prospects: the 2017 Revision



As a result of PFI's advocacy initiatives, adolescent sexual and reproductive health included in the Village Health and Nutrition Days (VHNDs) in Gaya district of Bihar

According to the National Family Health Survey (NFHS-4), in 2015-16, more than half of currently married women between 15 and 19 years of age have begun child-bearing; at least 10 per cent women in the age group of 25 - 49 years had sex before the age of 15, and 38 per cent by the time they were 18. Rather than a gateway to hastening sexual activity, sex education is

clearly a necessity to promote positive sexual and reproductive health and prevent unwanted pregnancies. With unfettered access to misinformation and pornographic material, providing scientific, age-appropriate information to young people would reinforce a rights-affirming and responsible approach to sex and sex education.

PFI supports counselling for adolescents in a vulnerable community

Madanpur Khadar is an urban slum cluster of 57,000 people, mainly migrants, settled along the swampy banks of the Yamuna river on the outskirts of Delhi. Where basic health services and access to amenities are at rock bottom, serving the needs of adolescents is a distant goal. Through a grant from PFI, Agragami India, a non-profit organisation, runs Project Khushali (Project Happiness) to provide hygiene, nutrition and reproductive health counselling to adolescents.

Confronted with unresponsive government schools, Agragami organised the counselling sessions for more than 1,500 adolescents at the local youth centre and health clinic. Apart from sessions with adolescents, the project has also counselled over a thousand parents, so that they are better informed and capable of addressing the needs of their children.

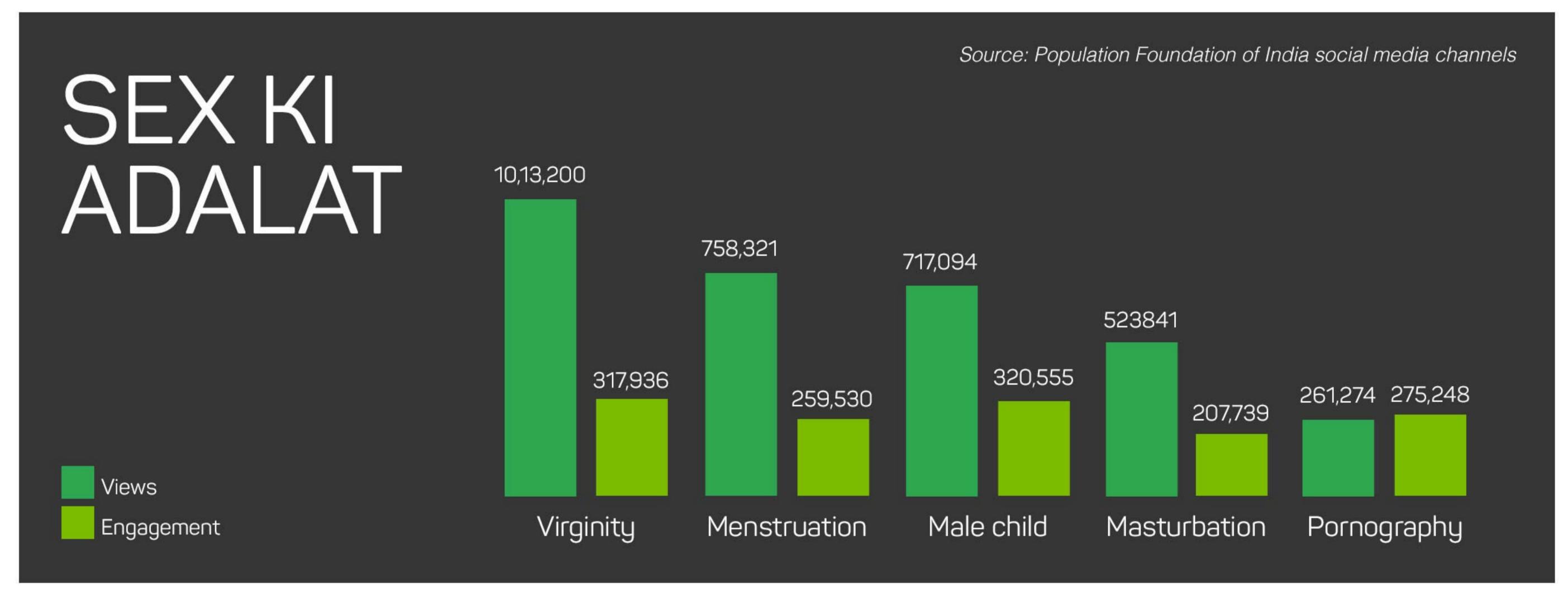


A DIGITAL PUSH ON TABOO TOPICS THROUGH ENTERTAINMENT-EDUCATION

Building on the global success in using entertainmenteducation for behaviour change, and PFI's own experience with Main Kuch Bhi Kar Sakti Hoon, we developed a series of five short films titled Sex ki Adalat and released them through our social media channels in September 2017. The films deal with topics related to sexual and reproductive health that are plagued by common myths and misinformation. They address the preference for a male child, the demand for evidence of virginity from women before marriage, shaming of adolescents for masturbation, the social taboos attached to menstruation, and adolescents being driven to seek information on sexual and reproductive health through pornography.

The five films were collectively viewed by more than 3 million and had reached over 5.9 million social media users through PFI's Facebook, YouTube, Twitter and Instagram channels, and through WhatsApp. The series succeeded in reaching the youth cohort as the largest number of viewers overall were between 18 - 24 years old.







5.9 million people reached through social media with digital series Sex ki Adalat



DISSEMINATING INFORMATION IN ADOLESCENT-FRIENDLY FORMATS THROUGH INNOVATIVE CHANNELS

While digital media has proven to be a powerful instrument to reach out at scale to very large numbers, the penetration and access to the internet by young people in many parts of India is still at a nascent stage. Additionally, there exists a bias towards male users, and girls are often left in the shadows of online communication. Keeping this in mind, the Social and Behaviour Change Communication (SBCC) package for adolescents

developed under the Advocacy, Communication and Accountability project have been converted into interactive stories and are being distributed on mobile SD cards through a network of about 30 mobile recharge shops in four blocks of Darbhanga and Nawada districts in Bihar. Over 1,000 young people have downloaded the application on their mobiles.

Adolescent girls seize the means to challenge social norms

It is rare to discuss sexual and reproductive health with adolescents, especially in rural areas that still hold on to deep-rooted prejudices and social taboo. Believing that young people, especially girls, should take control of their lives and their health, PFI launched a campaign in 292 villages in Bihar. Girls' groups were formed to meet every month, share information, and learn about subjects concerning them, including gender equality, mental and sexual health, hygiene, and nutrition. Social Behaviour Change Communication (SBCC) materials like message boxes (Sandesh ka pitara) were given to every girls' group, which allowed them to raise questions anonymously and openly discuss taboo topics. Menstrual hygiene emerged as an important concern for the girls, and they decided to set up a **sanitary napkin bank through their own monthly contributions**. Girls who would otherwise have lost school days or be restricted to their homes during menstruation were able to take care of their personal hygiene, and control their mobility.





