

Brazil

Health/Adolescent Development and Participation

Adolescents' sexual and reproductive rights: fostering the peer education

January – December 2018



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Abbreviations and Acronyms

HMAM	Hoje Menina, Amanhã Mulher / Today`s Girls, Tomorrow`s Women
STI/HIV	Sexually Transmitted Infections/Human Immunodeficiency Virus
IBGE/PNAD	Brazilian Institute of Geography and Statistic/National Household Sample Survey
PCU	Platform for Urban Centres
SDG	Sustainable Development Goals
ECOS	Non-governmental organization Comunicação em Sexualidade
NGO	Non-governmental organization
VMSJ	Youth Awareness Initiative

Executive Summary

UNICEF Brazil has a direct action, in cooperation with public managers, in ten Brazilian capital cities, from three different regions of the country: Belém, Fortaleza, Maceió, Manaus, Recife, Rio de Janeiro, Salvador, São Luís, São Paulo and Vitória. The actions are dedicated to face four great challenges: neonatal mortality, school exclusion, **adolescent pregnancy** and homicides of adolescents. The methodology used is to engage different institutions in the design and implementation of collective actions, capable of accelerating the response to these challenges.

In the adolescent pregnancy agenda, all the intersectoral dialogues conducted throughout 2017 and 2018 point out to the urgency of broadening the preventive actions led by the adolescents and youth themselves, in the language and interaction forms proper to this life phase. However, there are doubts and insecurities about how to propel such actions, especially in a context of political and social barriers to an approach regarding sexual and affective development of adolescents in schools and other institutional spaces.

In the first semester of 2018, a decision was made to invest in the identification and dissemination of tools and content for the education among peers, with focus on the sexual and reproductive rights of adolescents, especially concerning the prevention of unintended pregnancy. Through the support of the **Global Health Thematic Fund**, Grant SC149901, in the total value of **US\$ 52,063.95** for the programmatic area, a cycle of activities was developed in the period of July to December of 2018, which are hereby reported with the given name of “Entre Pares”¹.

The actions conducted were aligned to the Output 2 of the Country Program Document (CPD) 2017-2021:

By 2021 boys and girls have increased access to quality and responsive health, education and social protection programs, and actively participate in the design, implementation and monitoring of these services.

And had the objective of contributing to the indicator 2.1:

Families, communities and civil society have increased knowledge on health practices and government agencies and health professional provide culturally and age and gender responsive health services.

The methodological path initially designed had soon to be adjusted: it was considered that the effort to map, compile and disseminate the existent productions would be sufficient. But, the first finding was exactly the lack of contents on the more recent challenges, such as sexting, and the scarcity of digital content. Generally, the materials are in print, extensive

¹ “Entre Pares” in a literal translation means “Among Peers”. It was chosen as a reference to the peer-to-peer education and health practices led by adolescents.

and target to the educators. With these challenges in perspective, the project covered the following phases:

- 1) The mapping and analysis of existent content on the issue, observing the language appropriateness to the young public and if it is updated with current knowledge and trends.
- 2) The collective reflection on the gaps and on the approaches and platforms that are more coherent to the realities of the adolescents, through conversation circles with adolescents from the 10 cities.
- 3) The collaborative construction and testing of argumentative, editorial and visual strategies developed in a national meeting.

The identification of existent content, first phase of the work, had as starting point the national meeting conducted by UNICEF in Salvador, in May of 2018, of experiences aimed to reduce adolescent unintended pregnancy. Representatives of 15 social organizations and government projects participated, sharing their methods and materials. On the scope of “Entre Pares” project, the institutions’ representatives were invited to participate on a survey about the educational materials that they develop, use or know. The consultation had the feedback of **27 organizations**, leading to a map of **46 materials**, which after analysis originated a [tool list](#).

In the phase of consult and engagement of adolescents, the expertise of boys and girls already engaged in UNICEF initiatives were invoked, in a total of 11 conversation circles, with the participation of **151 adolescents and youths**. Those girls and boys came from different UNICEF initiatives, such as “Hoje Menina, Amanhã Mulher” (HMAM), or **Today’s Girls, Tomorrow’s Women**, that developed in 2018 a cycle of girls’ empowerment actions in three capital cities: Salvador, Recife and Belém. Or from “Viva Melhor Sabendo Jovem”, or **Youth Awareness Initiative**, which promotes HIV testing among youth. The conversation circles represented, therefore, a moment of diagnosis, but also of strengthening of youth leaderships, enriching their competencies to access and disseminate trustworthy information.

This effort resulted in a set of orientations ([guideline](#)) on how to approach such issues with adolescents. And the main delivery of the initiative represents exactly the effort of putting such reflections in practice, with the development and testing of a [set of cards](#) for social media (possible to print) addressing the main doubts of the adolescents in a straightforward, fragmented, and, when possible, humorous language; and a [board game](#), off-line, that allows the adolescents to experiment and face different life situations related to their sexual health and reproductive health. Still as a legacy of the initiative, there are inputs for the development of digital strategies, such as virtual interaction scripts.

This proposal allowed UNICEF to converge knowledge and networks for the organization of a tool kit that combines tools validated by the youth. The content built by adolescents approached the gaps identified by them. In 2019, such materials will be disseminated together with the same actors involved – boys, girls, social organizations and government partners.



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Strategic Context of 2018

In the agenda of sexual and reproductive rights, Brazilian girls and boys face important challenges, mostly concerning sexual violence, adolescent pregnancy and STI/HIV infection.

Gender plays a significant role in the cases of sexual violence, which also engenders other forms of gender-based violence and abuse, such as abusive relationships and sexting. In spite of strong legislation on domestic violence, there has been an 8.4% increase in recorded cases of rape in 2017 (60,018) when compared to 2016². The number of registered cases of domestic violence reached 606 per day (221,238 in total)³. In 2017, the Brazilian hotline 'Disque 100' (Dial 100) reported 84,049 complains of violence against children and adolescents, 10% more than in 2016, 48% being girls and 40% boys, including neglect, physical and psychological violence, sexual abuse and sexual exploitation.⁴

Adolescent pregnancy remained a concern as there were still 477,246 births from mothers aged 15 to 19 (16,7% of total births) in 2016 - and even more concerning - 24,135 births from mothers aged 10 to 14⁵. Pregnant adolescents are particularly vulnerable to health and social risks. The total of 13% of all maternal deaths occurred to women under 20 years old in 2016⁶. Over 75% of girls from 15 to 17 years old who have children do not go to school according to the Brazilian Institute of Geography and Statistics/National Household Sample Survey (IBGE/PNAD 2013). These are serious concerns especially for younger girls: 24,135 live births were of mothers aged 10 to 14 in 2016, 8.4 per 1 thousand live births, and 477,246 of mothers aged 15 to 19, 167 per 1 thousand live births⁷. Early motherhood is related to increased vulnerability as it often decreases adolescent girls' possibilities to finish their education. Moreover, young mothers face discrimination and stigmatization from healthcare professionals.

While the HIV transmission from mother to child dropped by half from 1995 to 2015⁸, Brazil watched a substantial increase of adolescent boys infected by HIV. In the last 10 years, this number triplicated⁹. In 2016, there were 2200 new cases of girls and boys with HIV from 15 to 19 years old.

To respond to these challenges, UNICEF engaged in the 10 cities participating in the Platform for Urban Centres strategy (PCU), around 900 public and civil society actors and 300 adolescents in 17 intersectoral thematic dialogues. They developed collective impact plans on priority topics such as early childhood development; preventing school exclusion; adolescent sexual and reproductive rights and the prevention of adolescent homicides. Out

² Brazilian Public Security Forum. < <http://www.forumseguranca.org.br/publicacoes/anuariobrasileiro-de-seguranca-publica-2018/>> (access Jan.16.2019)

³ Brazilian Public Security Forum. < <http://www.forumseguranca.org.br/publicacoes/anuariobrasileiro-de-seguranca-publica-2018/>> (access Jan.16.2019)

⁴ Human Rights Ministry, Ombudsman's Annual Report 2017, released in May 2018.

⁵ Ministry of Health. MS/SVS/CGIAE - Sistema de Informações sobre Nascidos Vivos – SINASC.

⁶ Ministry of Health, DATASUS.

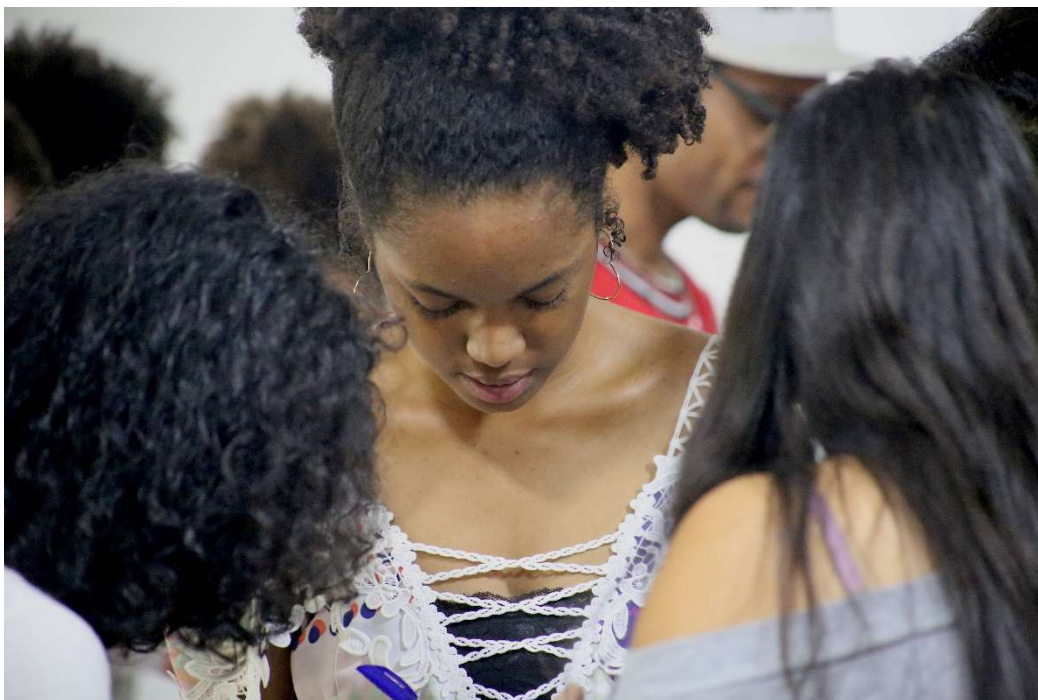
⁷ Ministry of Health, DATASUS.

⁸ Ministry of Health, DATASUS.

⁹ Ministry of Health, DATASUS.

of 10 capital cities engaged in the PCU, 07 selected sexual and reproductive rights as their priority. The prioritization shows the interest of local authorities to address this subject.

To achieve the Sustainable Development Goals 5 (to achieve gender equality and empower all women and girls), UNICEF Brazil ran an empowerment life-skills workshop for 497 adolescent girls, who successfully advocated for the adoption of gender-responsive municipal health policies in three urban centres. The office also trained 191 public policy managers who incorporated gender-responsive health policies into the municipal agenda. UNICEF supported the production of an adolescent mobilization guide used by 1,403 municipalities enrolled in the Seal initiative and a guide on good practices to reduce adolescent pregnancies.



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Results Achieved

The actions implemented with the support of the Global Health Thematic Fund allowed to:

- 1) build a [tool list](#) from the current availability of content on sexual and reproductive rights, with focus on the adolescent public, elaborated through the consultation in which 27 institutions participated;
- 2) construct [collectively approaches](#) and platforms potentially more adherent to the reality of youth through 11 conversation circles conducted in 10 capital cities, from three different Brazilian regions, with the participation of 151 adolescents and youths;
- 3) produce and test collectively argumentative, editorial and visual strategies, developed in a national meeting ([cards](#) and [board game](#))

All was done in dialogue and engagement with partners from the 10 cities involved in UNICEF's initiative, besides Federal Government and corporate partners. **There were 151 adolescents directly impacted and 27 organizations engaged in the content consultation.**



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The actions implemented strengthen the achievement of the Sustainable Development Goals, especially the SDG 5 -*Achieve gender equality and empower all women and girls*, since the assurance of adolescents' sexual and reproductive rights demands addressing gender inequalities, as mentioned before. Based on the lessons learned from previous initiatives, the project listened to both girls and boys, proposing discussions that dealt with the challenges of being a girl and the present masculinity patterns.

The project focused on the dialogue with girls and boys that were already engaged in another initiative, hearing from them how to reach their colleagues that still have no access to quality information and no opportunity to reflect about their sexual-affective development. Not to leave anyone behind, the project asked the youths that are minimally included in the circuits of information and debate about the best strategies and languages to amplify the reach of such messages and propel the dissemination of knowledge that they acquire in these projects.

The project assumed as premise that there is already a significant body of content and material about the issue and that the boys and girls are the best way to understand what works and that needs to be reinvented. The project also bases its design in the analysis of determinants of adolescent pregnancy, conducted by UNICEF Brazil in 2015 and systematized in this [publication](#) (in Portuguese).

The analysis shows, for example, the need to go beyond the social and crystalized understanding that pregnancy is a problem to society, opening the space to comprehend the dimensions of desire and autonomy construction of the adolescents, among other aspects involved in the intended and unintended pregnancy.

Regardless of its achievements, the message of the adolescents surrounds already known critique: *the adults must respect our desires, understand our languages, the meaning of our practices, without a moralizing and punitive bias, and discuss the administration of risks and alternatives post risk exposure.*

Technical partner

The activities were developed in technical partnership with the non-governmental organization *ECOS – Comunicação em Sexualidade*. ECOS was founded in 1990, with the objective of defending Human Rights and Sexual and Reproductive Rights, especially of the most vulnerable populations, women and youth.

The organization produces and uses knowledges from multiple areas, such as Education, Health, Communication and Social and Community Development, always in the perspective of the expansion of the “rights culture”, the fulfillment of citizenship, gender equality, the respect of diversities and the free and healthy human development.

Besides, always had an active participation with visibility in the field of Human Rights, the fight against aids, the women movement and the recognizing of sexual diversity.

Results

Result 1: toolbox (list) made from existing contents on sexual rights and reproductive rights, with emphasis on the adolescent public, elaborated by means of consultation, that counted with the participation of 27 institutions of reference.

The technical partner has mapped, together with specialists and partners, material and content (games, guides, booklets, videos, folders, posters, etc.) in physical and virtual formats on sexual and reproductive rights of adolescents and young people, especially those dedicated to the adolescents themselves. The research was also complemented by active search on the internet.

The collection made with the partners was done through a form in Google Platform, which can be known through [this link](#) (in Portuguese), with open and closed questions. The consultation had 27 feedbacks, as described below:

Table 1

City	Amount	Type of Institution
Aracaju (SE)	1	City Hall (Municipal Department of Social Assistance)
Belo Horizonte (MG)	2	Gynecologist / Obstetrician Health and Medical Center
Brasília (DF)	1	Health Office (Teen Center)
Cabo de Santo Agostinho (PE)	1	NGO Women's Center of Cabo
Campina Grande (PB)	1	Federal University of Paraíba (UFPB)
Campinas (SP)	1	NGO (Reprolatina)
Fortaleza (CE)	1	Federal University of Ceará (UFCE)
Manaus (AM)	1	Regional Department of Health Education of SESC
Rio de Janeiro (RJ)	2	Research organization (Fiocruz), National Department of Health Education of SESC
Salvador (BA)	9	NGO (ASSOREM, International Plan, ODARA, Adolescer com Arte), Specialist, Public Foundation (FUNDAC Bahia), City Hall (Municipal Department of Policies for Women, Children and Youth, Municipal Health Office)
São Luiz (MA)	1	NGO (International Plan)
São Paulo (SP)	5	Research Office (Health Institute of the State Health Secretariat), NGOs (International Plan, Viração Educomunicação, Kaplan Institute), Social Organization (Family Health Association)
Vitória (ES)	1	City Hall (Department of Social Work and Psychology)

Highlights of feedbacks/findings:

- Most of the known materials are from the guides/manuals/booklets category, followed by educational games and videos. In digital terms, they pointed out the U-

Report, UNICEF's own initiative, and the website "Pra Brilhar" ("To Shine") from NGO Viração Educomunicação, technical partner of UNICEF.

- Although they point to the Internet, especially social networks, as a powerful tool for addressing sexual rights and adolescent reproductive rights, organizations report being unaware of digital materials and technological resources.
- Schools and health units remain privileged spaces for the use of materials, but they point out that schools are a space which continuously grows less open to these topics.
- At least 9 responses (1/3) indicated that adolescents participated in the preparation of materials.
- About what they would change/improve on the materials they have developed or know they said: scan, make versions for online gaming and social networks, organize content in apps.

The full report with the feedbacks to the research from **27 organizations** can be accessed at [this link](#), in Portuguese. After this stage, the technical partner listed **46 materials** (digital and printed) and performed the reading and analysis of the contents, observing: public, updating, accessibility and the content addressed. After a first filter, the materials were submitted to consultation with the adolescents in face-to-face meetings. Based on the analysis and feedbacks, a **list of materials** considered relevant for actions with/among adolescents was built, available in [this link](#), in Portuguese.



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Although the list compiles interesting materials, the analysis showed important gaps, especially in relation to availability of content in digital formats. In addition, although the list included materials with up-to-date content, there was a gap regarding more recent challenges, such as sexting. In general, the materials printed, are extensive and dedicated to educators. Contents for social networks, for example, were not identified. Thus, the

distribution of the toolbox awaits the completion of the products elaborated in the following stages and will occur during 2019. Up to this moment, the list has been made available to partners on demand.

Result 2: more adequate approaches and platforms were suggested collectively by means of 11 conversation circles held in 10 capitals, from three different Brazilian regions, with the participation of 151 adolescents and young people.

Conversation circles were performed as detailed below:

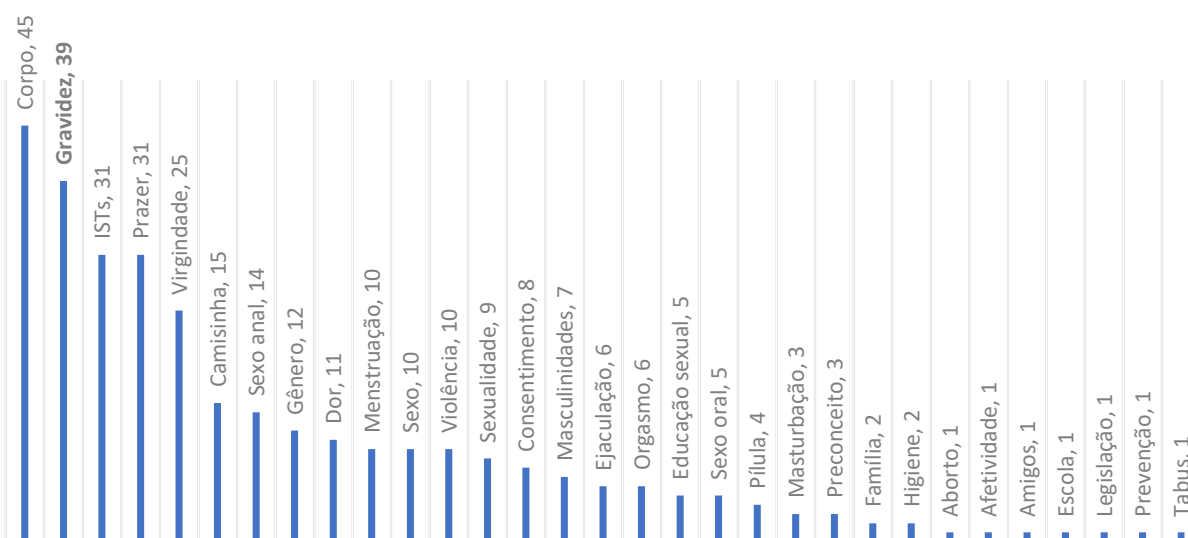
City	Partner	Date	Amount
Vitória	CRAS	10/09/2018	15
Rio de Janeiro	RAP of Health	11/09/2018	18
Salvador 1	ASSOREM	12/09/2018	10
Salvador 2	Gapa	13/09/2018	11
São Paulo	Plan	17/09/2018	12
Maceió	City Hall	02/10/2018	10
Recife	HMAM	03/10/2018	10
Manaus	School	24/09/2018	28
Belém	HMAM	25/09/2018	10
São Luís	VMSJ	27/09/2018	13
Fortaleza	Cuca	11/10/2018	14
TOTAL			151



In the first image, a conversation circle held in São Luís. In the second, a record of the activity in Manaus.

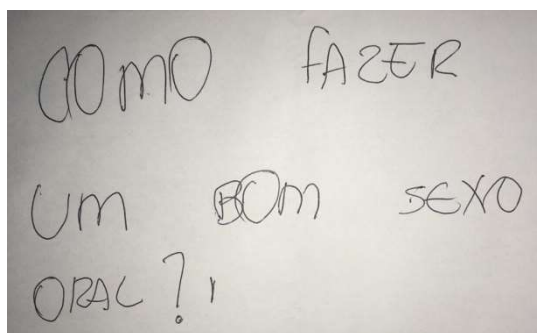
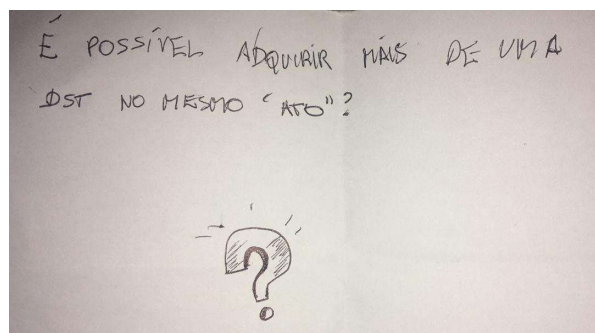
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The first group dynamics suggested to the adolescents was the "question box", so that they would write anonymously their doubts about sexuality and reproduction. In all, there were 232 questions, which were answered one by one. Thus, besides constituting a diagnosis, this activity allowed to expand the knowledge of adolescents and young people who already act as protagonists in their institutions and projects of origin. One or two keywords were assigned to each question, and this made up the following panel:



(in order of appearance:)

Body/pregnancy/STIs/pleasure/virginity/condom/anal sex/gender/pain/menstruation/sex/violence/sexuality/consentment/masculinity/ejaculation/orgasm/sexual education/oral sex/pill/masturbation/prejudice/family/hygiene/abortion/affection/friends/school/legislation/taboo.



Examples of questions: In the first image, "is it possible to catch more than one STD in the same act?"; in the second image, "how can one have a good oral sex?".

Other questions that illustrate the universe of adolescents' doubts:

- Why does a man rape a child?
- Is it possible to get pregnant on the first date?
- If I take out my penis before I cum, will the girl get pregnant?
- Is it possible to get pregnant even "in those days?"
- Does swallowing sperm transmit disease?
- Does AIDS happen only to queers?
- Why does the first time hurt?
- Why are some guys envious of another guy's dick?
- Is it normal to not feel pleasure?
- How can I make a girl come faster and have more pleasure?

Regarding the sources of information, they access the adolescents pointed out the following:

What they mentioned	<ul style="list-style-type: none"> • References: Internet, friends, and reluctant family and teachers. • Physical materials: Semina Kit, Futura Suitcase, SPE Guidelines, Adolescent Health Booklet, Prevention Mandala. • On the internet: yahoo answers, porn sites, youtubers, Fabi Grossi (UNICEF) and U-Report (UNICEF).
Content	<ul style="list-style-type: none"> • When it comes to porn, they report that they look for it to learn about sex, although they point out that it "misrepresents" sex (white, skinny, high performance, objectification of women)." Porn does not talk about protection, it does not talk about pleasure". • Extensive and very linear content (birth, puberty, on the last page has the condom). • Emphasis on diseases (disgusting photos). • They do not easily find out: guidelines on what to do when they engage in risky behavior, content that tells about sexual practices more directly, forms and places of help in case of violence, information about the rights of the pregnant teenager. • Materials in regard to paternity and questions about masculinity (in the cities' outskirts, many adolescents are not raised by their fathers). • Content centered on error and tax actions.
Language	<ul style="list-style-type: none"> • Technical language, formal, unattractive. • Illustrations and children's language
Format	<ul style="list-style-type: none"> • They have difficulty downloading applications: lack of memory in mobiles (devices are simple) and layout (it requires many steps). • In the North Region, they are very concerned about adolescents who do not have access to the internet.
Access	<ul style="list-style-type: none"> • They feel criticized when seeking information and / or access to materials.

About what they expect, they point out:

Content	<ul style="list-style-type: none"> • Pleasure and risk management. • Approach of emotional aspects, such as fears, desires, joys and anxieties related to sexuality, motherhood and paternity in adolescence. • Information on testing for STIs: where, how, rights. • Consider racial, gender (paternity), homophobia issues. • Information about services and support networks where they can seek help or report sexual violence. • Empowerment: Empowered girls often postpone pregnancy to youth or adulthood and are more able to negotiate condom use. • Information on what to do if you take risk behavior (harm reduction). • Information about laws that protect them.
Language	<ul style="list-style-type: none"> • Direct and concise information. • A humorous language, linked to the "things of the moment" of the young universe (subjected to updating). • Aesthetics of young people. • Suitable for different regions.
Format	<ul style="list-style-type: none"> • Questions and answers: question box (chat, blog, facetime). • Life experiences (avatar).
Access	<ul style="list-style-type: none"> • Online and offline, with the possibility of being downloaded to support group activities, which remain essential. • Where they already are: Facebook, WhatsApp, Instagram.

The dialogue with adolescents and young people showed the urgency of investing in new languages and formats. It is a generation that demands fragmented information, in "topics", and that respond directly to their doubts. The experience of seeking answers on the internet, in the form of questions, reflects the expectation of these girls and boys. At the same time, they understand that what is provided by the internet is unreliable and often reinforces stereotypes detrimental to affective-sexual development.

It has also been a great learning process to understand that access to technologies is still a challenge, especially in the outskirts of large cities. Downloading apps is not an option for most of these girls and boys. Another lesson learned is that, even if they can download apps, they are not willing to do so. They point out that the most effective way is to provide content that reaches the spaces of virtual interaction in which they are already present. At this point, they especially cite Facebook, WhatsApp and Instagram.

Such analysis will enable UNICEF to move forward with ongoing efforts to provide interaction experiences through artificial intelligence. At the same time, it qualifies the staff repertoire for technical cooperation actions with partners who invest in developing strategies to strengthen messages on the topic.



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Result 3: argumentative, editorial and visual strategies to approach the gaps built and tested collectively through a national gathering with the participation of 11 adolescents from 09 Brazilian capitals.

Following the activities, the National Gathering on Sexual and Reproductive Rights of Adolescents and Young People was held in the city of Brasilia from November 12 to 14, 2018, with the participation of 11 adolescents and young leaders, who integrate projects and collectives in their cities of origin, as detailed below:

Name	City	Iniciative	Age
Beatriz Sant'Anna Mello Silva	Vitória/ES	Student and class leader at school. She participated in the UNICEF Sexual and Reproductive Rights Dialogue.	18
Bianca* (<i>fictitious name to preserve the identity of the young woman, which has her history reported in Annex 1</i>)	São Luiz/MA	Projeto Viva Melhor Sabendo Jovem (UNICEF). Active in regard to the topics of HIV / AIDS.	17
Jonas da Silva e Silva	Salvador/BA	GAPA - BA. It is part of the VMSJ (UNICEF). He is an activist and social mobilizer of the youth group Ginga in the community of Subúrbio Ferroviário. Performs peer-to-peer activities on HIV / AIDS.	23

Lara House Kelma Pantoja	Manaus/AM	Student. She stands out for discussing issues related to gender equity and coping with violence against women.	16
Laura Piedade	Rio de Janeiro/RJ	Network of Adolescents and Young Health Promoters, Rio de Janeiro City Hall project.	17
Lorena Araújo Costa de Jesus	Salvador/BA	It is part of Projeto Hoje Menina Tomorrow Mulher (HMAM). It acts with the empowerment of girls and sexual and reproductive health issues.	16
Maria Eduarda Baia Dias	Belém/PA	High school student. She is part of the Empodera MANA Project. Held workshops on the empowerment of girls.	16
Maria do Carmo Alcantara Silvestre	Recife/PE	She is a facilitator of Projeto Hoje Menina Tomorrow Mulher (HMAM). Performs peer-to-peer activities in schools to discuss female empowerment.	17
Mayara Edwirges Martin Guimarães	São Paulo/SP	Healthy Teen Project by Plan International.	15
Renata Vitória Porfirio Castro	Maceió/AL	Student. She participated in the UNICEF Sexual and Reproductive Rights Dialogue.	17
Filipe Trindade	São Paulo/SP	Viva Melhor Sabendo Jovem, an AIDS camp activist, social educator and rapper.	26

The meeting also had the active and participative presence of a representative from Adolescent Health department, from the Ministry of Health. At the time of the meeting, the Ministry invested in the development of an app and was interested in better understanding the demands and suggestions from adolescents.

Also present was a representative of TV Channel Futura, which is UNICEF's partner on the sexual and reproductive rights agenda. The discussions brought inspiration for the development of new audiovisual content.



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Products

The national meeting has allowed us to deepen into the universe of the adolescent's doubts and questions. Based on this, the following categories were systematized: body, rights, maternity/paternity, Sexually Transmitted Infections, sex and violence. Through writing exercises, the question and answer model was identified as the most appropriate editorial line. The adolescents were invited to experience answering some of the questions, which allowed us to capture language styles and to test the workings of the expressions in the context of different Brazilian regions.

The format used to work on the content was "cards", visual pieces that can circulate through the internet, on social networks, and also on WhatsApp. Each card needs to be independent, but it can also lead to others. Card-making activities were done during the gathering, also with the aim of capturing visual references from the group.

30 cards were then produced, as exemplified below:



Content: What to do to not get pregnant during adolescence? In general, there are several methods and teenagers can use all of them. Some are: Condom, Pill, IUD, Hormonal, Copper IUD, Injection. From these, only condoms prevent disease. Each has a different interaction with the body. Research them and get in touch with health professionals.

The cards are in the final review phase and will be distributed among teenagers mobilized from a closed Facebook group. Uses and repercussions will be monitored, as well as suggestions for changes. Besides the virtual use, the cards will also have a printed version, accompanied by a guide with suggestions of dynamics to be used with it. Adolescents shared concerns about access to information by adolescents living in rural areas, especially in the northern region of the country.

Another product is a **board game**, a very popular tool among young people. Although signals pointed to a virtual and physical game, in the scope of the present project it was possible to advance in the prototype of a physical game. The prototype was developed prior to the national gathering and then tested by the participants, who made a series of recommendations. Below an overview of the game, after adjustments requested by the young people were made.

All materials developed will be made available to partners through a virtual toolbox (google drive, with access via pdf with links). It shall contain:

- **Publications:** the list of materials mapped and evaluated as to how current they are and how adequate the language is for the young public.
- **Videos:** the list of audiovisual productions mapped and evaluated as to how current they are and how adequate the language is for the young public.
- **Cards:** all cards produced, for download and sharing.
- **Game:** the board game will be available in PDF, in A4 format, compatible with homemade printing, so that it can be assembled with few resources
- **Dynamics:** the cards will be available in PDF, A4 format, compatible with home printing, followed by a guide of dynamics to be use with it.



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Deviations, course corrections and lessons learned

The course initially planned considered that it would suffice to map existing productions, compile them in a physical kit (including references to virtual productions) and then distribute this among adolescents and young leaders with a history of acting on the agendas concerned.

The first course adjustment had to be performed after the initial mapping of existing productions. There was a lack of content on the most recent challenges, such as sexting. In general, the materials printed are extensive and dedicated to educators, and the ones that have created them show a desire to migrate to a digital platform.

The next stage, therefore, designed to be the distribution of the kit, with the compilation of the identified materials, was converted into listening to adolescents and young people to deepen our understanding of contents, languages and platforms that could be more effective, innovative and in line with the contemporary challenges.

Another lesson learned comes from the interaction with these adolescents and young people. At first there was an expectation that they would be more autonomous to work on the subject of sexual rights and reproductive rights, as they came from previous projects or experiences on the subject. What we found out, however, was that they have basic questions about the body and sexuality. Another point that calls our attention is that they reproduce an interdicting discourse: it cannot be done, but they do not know how to proceed or guide after exposure to a risky behavior. In general, they know the more general prescription, like going to a health unit, but the step-by-step course of action also eludes them.

Thus, we saw the importance of content dealing with this "how" in detail. In face-to-face meetings, it was possible to map the main things that generate insecurity and anguish, as well as possibilities for responses. That is a point that will need to be faced in a second investment of the initiative.

Besides, in a second investment of the initiative, there should be a digital space for answering the specific questions raised by adolescents. A robot will be able to respond to this demand in a systematic and sustainable way. As inputs, the project leaves the legacy of a robust out of questions and ways to respond them.

Assessment Framework from the Results

Distribution and replication of products will be object of work in 2019. Thus, below, we share what impacts and goals we expect to achieved with this effort:

Inputs/products	Impacts	Indicators (baseline, milestones and goals)
List of materials	Expanded access to content already produced	Submission to at least 30 reference organizations.
Guidelines for new contents	New productions more in line with young people's expectations	Submission to at least 30 reference organizations.
Cards (digital and physical)	Greater access to knowledge on health practices	100 teenagers and young leaders with access to digital content
Board game	Greater access to knowledge on health practices	100 adolescents and 30 reference organizations with access to the print version
"Step by step" input	Narratives of courses developed in audiovisual language	Sharing the demands of courses with partners with expertise in audiovisual production
Inputs for questions and answers robot	Greater access to knowledge on health practices	Robot developed

Financial Analysis

Table 1
Thematic Sector 2: Health
Brazil
Planned and Funded for the Country Programme 2018

Planned and Funded for the Country Programme 2018 (in US Dollars)				
Intermediate Results	Funding Type	Planned Budget	Funded Budget	Shortfall
21-09 Adolescent health and nutrition	RR	–	–	–
	ORR	52,063.95	52,063.95	–
Total		52,063.95	52,063.95	0.00

Table 2
Thematic Pool 2: Health
Brazil
Thematic Contributions Received for Thematic Pool 2 by Unicef Brazil in 2018

2018 Thematic Contributions Received (in US dollars)			
Donors	Grant Number	Contribution Amount	Programmable Amount
Thematic MTSP 2018-2021 Outcome 2: Health	SC149901	74,377.07	52,063.95
Total		74,377.07	52,063.95

Table 3

**Thematic Sector 2: Health
Brazil
Expenditures by Key-Results Areas in 2018 (in US Dollars)**

2018 Expenditures by Key-Results Areas (in US Dollars)				
Organizational Targets	Expenditure Amount			
	Other Resources Emergency	Other Resources – Regular	Regular Resources	All Programme Accounts
21-03 Child Health	28,847	753,497	70,769	853,113
21-05 Treatment of severe acute malnutrition	6,018	0	37,923	43,941
21-07 HIV prevention	1,907	254,237	14	256,157
21-08 Early childhood development	1,599	228,641	12	230,251
21-09 Adolescent health and nutrition	16,751	314,502	1,291	332,544
Total	55,122	1,550,877	110,008	1,716,007

**Table 4
Thematic Sector 2: Health
Brazil
2018 Expenditures of Thematic Contributions by Results Area**

Fund Category	All Programme Accounts
Year	2018
Business Area	Brazil - 0540
Prorated Goal Area	(Multiple Items)
Donor Class Level2	Thematic
Row Labels	Expense
Other Resources - Emergency	30,037
21-03 Child Health	15,795
21-05 Treatment of severe acute malnutrition	462

21-09 Adolescent health and nutrition	13,780
Other Resources - Regular	271,113
21-07 HIV prevention	186,899
21-09 Adolescent health and nutrition	84,215
Grand Total	301,151

Table 5
Thematic Sector 2: Health
Brazil
2018 Expenses by Specific Intervention Codes

Fund Category	All Programme Accounts
Year	2018
Business Area	Brazil - 0540
Prorated Goal Area	(Multiple Items)
Fund Sub-Category	(Multiple Items)

Row Labels	Expense
21-03-03 Child health policy advocacy, evidence generation, national/ subnational capacity development	31,153
21-03-11 HSS - Health sector policy, planning and governance at national or sub-national levels	534,090
21-03-99 Technical assistance - Child health	31,204
21-05-99 Technical assistance - Treatment of severe acute malnutrition	20,760
21-07-06 HIV Prevention programs for adolescents including Key population such as condom programming, VMMC and PreP	42,206
21-07-12 HIV testing including self-testing and counselling in adolescents	146,350
21-08-05 ECD Policy and system strengthening	158,129
21-09-03 Prevention of overweight and obesity in middle childhood (5to 9 years)	293,821
26-02-06 Analysis of data	1,904
26-02-08 Programme monitoring	32

26-02-09 Field monitoring	485
26-03-07 Strengthening C4D in Government systems including preparedness for humanitarian action	7,742
26-06-04 Leading advocate	61,183
26-06-06 Supporter engagement	121,450
26-06-07 Leading brand	503
26-06-08 Emergency preparedness (cross-sectoral)	52,561
26-07-01 Operations support to programme delivery	198,664
27-01-06 HQ and RO technical support to multiple Goal Areas	63
27-01-16 CO advocacy and communication	13,612
28-03-02 Leading voice at HQ	3
28-07-04 Management and Operations support at CO	92
30-01-02 Pledge campaign houselist	
30-01-13 CO/RSC other non-staff indirect	-
Grand Total	1,716,007

Table 6
Thematic Pool Area 2: Health
Brazil
Planned Budget and Available Resources for 2019

Planned and Funded for the Country Programme 2019 (in US Dollars)				
Intermediate Results	Funding Type	Planned Budget	Funded Budget	Shortfall
21-09 Adolescent health and nutrition	RR	–	–	–
	ORR	26,000.00	6,000.00	20,000.00
Total		26,000.00	6,000.00	20,000.00

Future Work Plan

The goods produced will be spread among the same actors mobilized - boys, girls, social organizations and government partners, and will be used in future collaborations and projects in the context of the topics discussed. It is worth mentioning that we expect to carry out the following actions:

- Distribution of tool kit (via google drive, with easy access through a pdf or google sites) for organizations, adolescents and young people, including: list of materials, guidelines for new content, cards and board game.
- Distribution of cards via social networks for mobilized adolescents and young people.
- Mobilization of resources to print board game and physical cards kit.
- Mobilization of resources for the development of artificial intelligence technology hosting the broad repertoire of questions collected, and their respective answers.
- Setting up partnerships to boost the production of audiovisual content by addressing the demand for "step by step" type explanations.

Moreover, UNICEF will continue in contact with the boys and girls benefitted by this project to support their ability to act as leaders within their schools, families and communities.



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Expression of Thanks

UNICEF in Brazil would like to thank the US Fund Committee for the partnership that has contributed to empower girls and boys about their sexual rights and reproductive rights. The resources provided were key to the development of innovative contents and strategies to address gaps on that agenda and test a methodology that is ready to be disseminated. UNICEF Brazil looks forward into continuing the partnership with the US Fund Committee which funding is key to innovate in methodologies to contribute to the achievement of SDG 5 in Brazil on gender equality.



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Annex 1 – Human Story

- Photos of activities that were done (includes image authorizations): [link](#).
- Below, low resolution photos with testimonials:



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"I would tell other young people to look for a lot of information, information will always be medicine against this prejudice."

"No one can force you to do something to please other people. It's a disrespect to oneself."

Franciele da Silva Santos, 18 years old, Project Viva Melhor Sabendo Jovem (UNICEF).

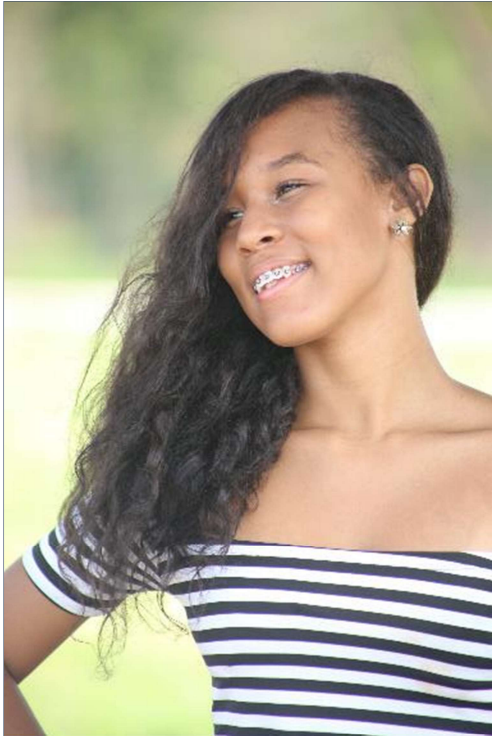


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"Our meeting was a wonderful experience, we heard other people's stories. We must follow through this path, pursue our rights, take our place."

"I'm here for other teenagers who do not know their rights. I would tell myself years ago: you have rights, know those rights, fight like a girl."

Laura Piedade, 17 years old, from Network of Adolescents and Young Health Promoters, from Rio de Janeiro city hall project.



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"After these projects, I have matured, and they made me believe that I can choose my profession and be what I want. And now I'm here with wonderful people. I'll cherish this moment through my whole life "

Lorena Araújo Costa de Jesus, 16 years old, is part of Today's Girl is Tomorrow's Woman Project (UNICEF), in Salvador / BA.



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"I'll go back with a lot of baggage, other concepts and stories. It is a very debated topic but very complex and the adults do not like to talk with us, with the young people. I will carry these messages: every young person should always fight, they must speak. And if they do not listen, we have to shout."

Maria do Carmo Alcântara Silvestre, 17 years old, from Projeto Hoje Menina Tomorrow Mulher (UNICEF), Recife / PE.



"For me these experiences are a way I may be able to help other people, it is an opportunity for education, information, health. If this could be spread around, it would be wonderful."

Maria Eduarda Baia Dias, 16 years old, is part of EmpoderaMANA Project (UNICEF).

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"We will fight for the sexual and reproductive rights of adolescents. No one is alone. This taboo has to end, it's about us and we have to talk about us."

Renata Vitória Porfirio Castro, 17 years old, participates in UNICEF activities in Maceió / Alagoas.

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"I've decided that no matter what I do, I want to always be involved in projects. I would tell myself, two years ago, don't let bad things put you down. Everyone has a lion in it, to fight and to say today I want to live another day. "

Lara House Kelma Pantoja, 16 years old, participates in UNICEF activities in Manaus / AM.

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- Below, [life story](#) of one of the young women who participated in the activity:

"We want to have the strength to live another day, to find ourselves.

Long live life. Hurrah to today!"

Bianca* is 17 years old, lives in a serodiscordant family and is a multiplier in São Luís, from project Viva Melhor Sabendo Jovem (Live Better Knowing Youth), facing the increase of HIV / AIDS among adolescents.

UNICEF Brazil

Bianca * is 17 years old. Her parents have been living with HIV for 16 years.

Joana *, Bianca's younger sister, is 15 years old. She was born when her parents were already living with HIV but did not know the treatment. The girl contracted the virus by vertical transmission, and now lives with HIV.

Roberto *, the youngest of the family, was born when the parents were already undergoing treatment. The mother received the necessary support during pregnancy, and the child was born without the virus.

Living in a serodiscordant family – one in which part of the family lives with the virus and part not - has caused Bianca to engage in the cause. The teenager, who lives in São Luís, is a multiplier of Viva Melhor Sabendo Jovem – a health strategy from UNICEF, the Ministry of Health, and partners, to increase access to HIV and other sexually transmitted diseases tests as well as immediate onset of treatment and adherence, in other words, continuity in treatment.

Bianca was one of the first teenagers to join the project, that arrived at her city in the beginning of 2017. At first, the teenager did not understand what actions, in practice, she could take to change the population's perception of a subject. She knew the topic was important, and directly involved the well-being of one's own family. At the same time, she was aware that engaging herself would mean dealing with community prejudice.

"The fact that I had seropositive people in the family made it easier for me to understand and open myself to new information." Until then, she knew that AIDS was a disease without a cure, but she did not understand, for example, that the defense cells could not defend themselves. A flu, for those who live with the virus, is two to three times stronger than it for someone who does not have it. And my parents, how do they do? The way we learn to prevent things is taking care of ourselves and understanding how drugs work in the body," she says.

Bianca remembers well the first things she learned in the project training. "We learned to do oral fluid tests on ourselves. In five minutes, a result came out, it was fast and certain. Information was right up there, something we did not have before. It's crazy to see how people's minds can be developed through social projects," celebrates teenager.

Over time, Bianca also got to know other teens and learned that she needed to be proactive in talking to people about HIV prevention.

Five months of training took place, and the teenager, along with the first 30 project multipliers, donned the shirt - which they designed with elements of local culture. She went on to visit the municipal schools and, in a dynamic way - from young person to young person - she fostered debates on the importance of respect for all forms of being and liking, on gender equality, belonging and identity. Other topics such as drugs, depression and suicide were also part of the dialogues in schools wherever she went.

On the streets, the performance is more organic, but the message is the same. "We went to the historical center of São Luís, in small parties, to distribute condoms. We introduced the Camisildo (a campaign mascot), with all our courage. If we didn't offer them the condoms, they would look for us," she says. Bianca comments that disinformation and ignorance about the use of condoms, especially the female condom, are common. That's when the multipliers themselves indicate the correct use. "It was something that happened from young person to young person and would make all the difference. When we get to a health center, we're usually frowned upon, and a lot of people think, 'My goodness, at this age and taking condoms!'."

Today, in São Luís, there are about 600 adolescents and young multipliers who have contributed to make the city more inclusive and protective of rights. In addition to going to the schools, they go to boys deprived of their liberty, people living on the streets and living in asylums. It was also through these adolescents that the project reached Pedrinhas, a community on BR 135 road, one of the neediest ones. The local school was the last one in the municipality to multiply the project.

Bianca, who is also a resident of the community, faces social taboos brought up by disinformation. "If you go to your home and your father sees you with a condom, there will be fights, even more so in a community, with country girls." This is just somebody guarding oneself, so it should be considered normal by society. Besides, it's not easy due to a lot of prejudice. 'Can you be infected by touching?', they think. A lot of people are afraid of using the seropositive person's silverware," says teenager.

With this realization, Bianca began to engage the family in the project. She called her uncles, cousins and her sister, Joana, who today is also a multiplier of the project. "My sister says she wants people to not be afraid of hugging her," she says.

Happy, Bianca also talks about the efforts of São Luís City Hall to sign the municipality of the Paris Declaration - a commitment that aims to accelerate actions and responses from cities around the world to the HIV / AIDS epidemic, by 2030.

At the end of the conversation, the teenager recalls a memorable moment that marked her life. It happened a year ago, December 1, 2017, during World AIDS Day. Together with other young people, she created a bond by linking their hands, near one of the county health posts that specifically addresses teenagers living with HIV. "We created a bond forming a red ribbon, the symbol of HIV, and it was very striking because it was a cheer for life. It was to show that we want to have the strength to live another day, a desire to

find ourselves. Long live life! Hurrah to today, so that we can guarantee the next encounter with all the young people around us. "

Life in the Community and dreams

Bianca's trajectory was marked both by great challenges and great achievements. In 2012, her family left a large house to live in a one-bedroom house of their own. She remembers that after that, the family changed their view towards those around them. "When we moved in, it was strange, because it was very different from our previous reality. After I arrived in the community, we learned the *cacuriá* dance (city's traditional dance for the *feira Junina*) and I noticed that more children would play and run in the street. "

Amongst the many difficulties they face are the floods, which are commonplace, as a solution for the water invading their home, she would sleep in a hammock hung in the living room. To this day they also have no sanitation or adequate sewage and the garbage truck route is far from their street, which is actually a border between two communities.

"My dream is to help my family, because we still live in that same place. We've always dreamed to achieve something in life. With Live Better, I learned what I wanted to be in life and how I could really help people with a certain profession. Psychology is something I see as a possibility. To understand other people's mind, understand how they feel and to give them information."

Viva Melhor Sabendo Jovem (Live Better Knowing Youth)

To address the increase in HIV / AIDS among adolescents, UNICEF in Brazil has created Viva Melhor Sabendo Jovem. It is a UNICEF health strategy, along with its partners, to increase the access that adolescents and young people aged 15-24 have to HIV testing and other sexually transmitted diseases and the immediate start of treatment. The initiative also has as a priority the continuity of treatment for HIV-positive young people, and access to prevention information.

Annex 2 – Donor Feedback

In this link is the form for feedback on the report presented: [English Version](#)