

Lasting and Novel Impacts of a Multi-level Adolescent Norms-shifting Sexual and Reproductive Health Intervention: Five-year Longitudinal Cohort Findings from Kinshasa

Francine E. Wood¹, Khudejha Asghar¹, Mengmeng Li², Rebecka Lundgren¹, Jennifer Gayles³, Caroline Moreau², Eric Mafuta⁴, Kara Hunersen², Kathryn M. Barker¹

¹Center on Gender Equity on Health, University of San Diego; ²John Hopkins Bloomberg School of Public Health; ³Save the Children; ⁴Kinshasa School of Public Health

BACKGROUND

Very young adolescents (VYAs - ages 10-14 years) undergo rapid physical, social and cognitive change as they enter puberty¹. They also face societal norms about gender and sexuality that shape their attitudes and behaviors related to sexual and reproductive health (SRH) throughout life².

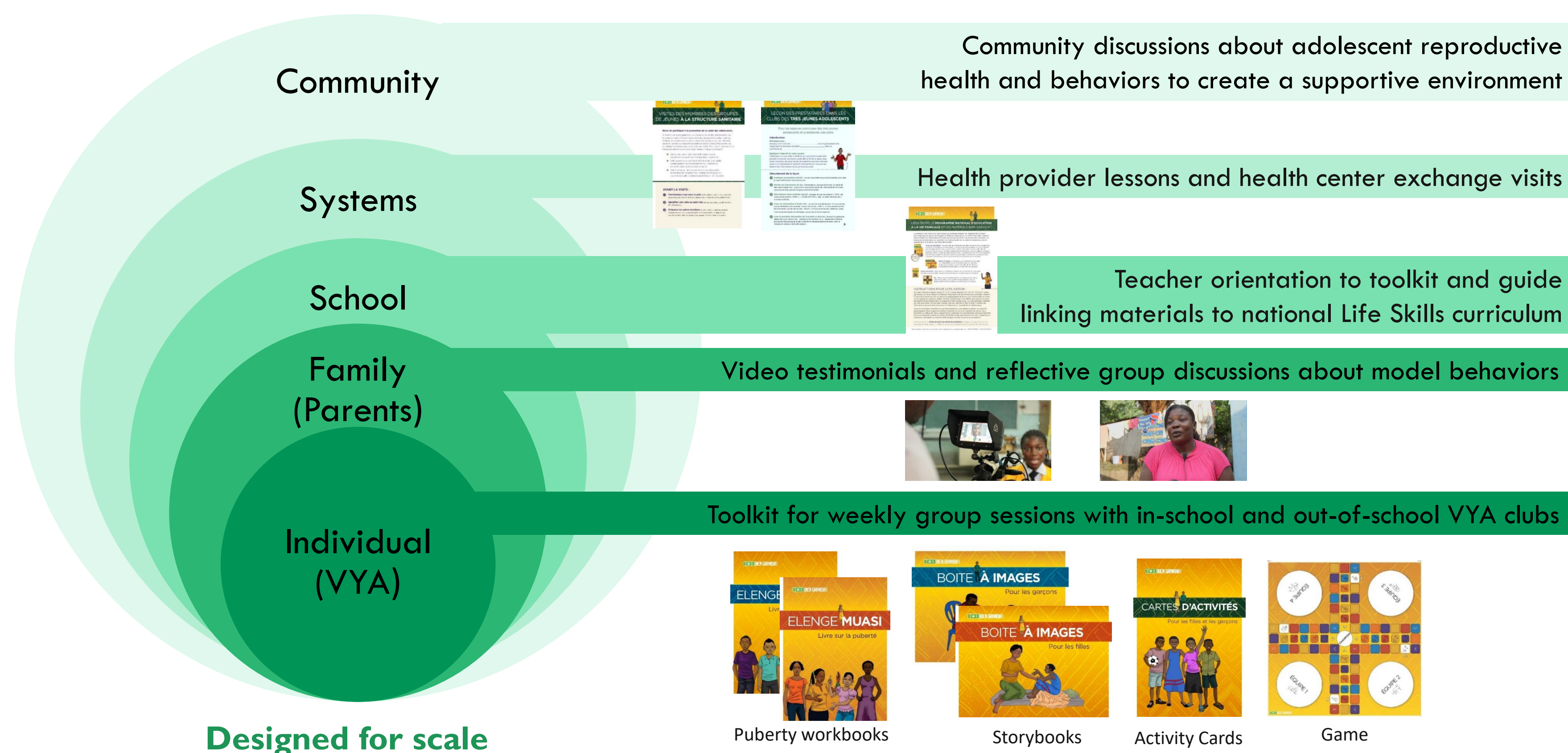
In Kinshasa, Democratic Republic of the Congo (DRC), less than one in five sexually active girls ages 15-19 years use a modern contraceptive and about 13% have already given birth or have been pregnant³.

In response, the Growing Up GREAT! intervention was designed to reach VYAs during this critical developmental period to improve SRH and foster gender-equitable attitudes across the life course.



GROWING UP GREAT! INTERVENTION

Growing Up GREAT! is a **multi-level gender-transformative sexual and reproductive health (SRH) program for VYAs** in Kinshasa, DRC. It was piloted September 2017 to May 2018 in the communes of Masina and Kimbanseke amongst male and female in-school and out-of-school VYAs, as well as their parents and community members.



RESEARCH AIM

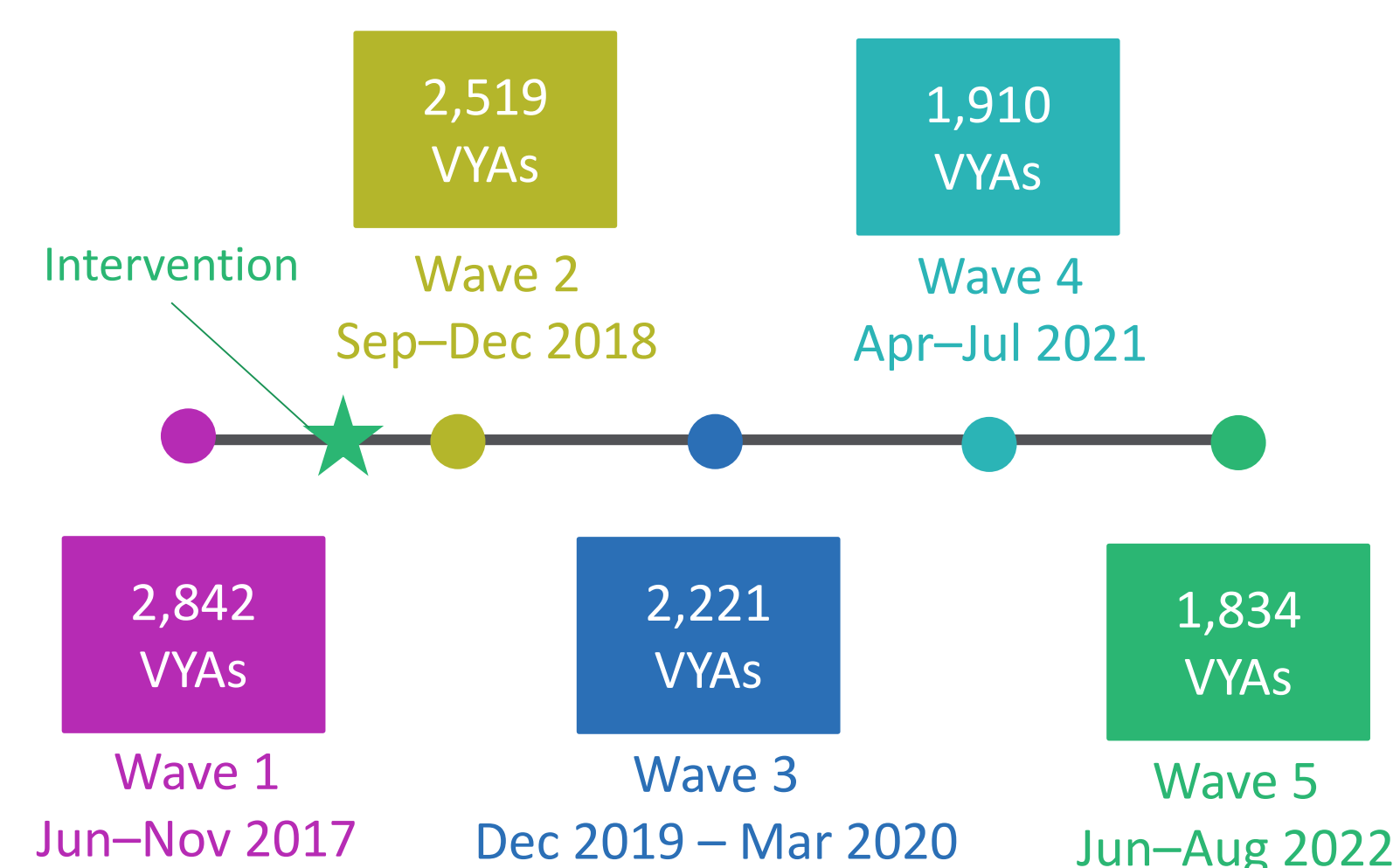
Evaluate the longitudinal impact of Growing Up GREAT! (GUG) among VYAs on **four intermediate outcomes**:

- 1) Puberty and SRH knowledge and attitudes
- 2) Assets and agency
- 3) Bullying and other forms of violence
- 4) Gender-equitable attitudes and behaviors

METHODS

We used a **quasi-experimental longitudinal design** and **difference-in-differences analysis** to compare trends in outcome indicators between intervention and control groups between baseline (W1) and follow-up at four subsequent waves (W2-W5). Each cohort was divided into two subgroups: in-school (IS) and out-of-school (OOS) adolescents.

Data were collected as part of the **Global Early Adolescent Study (GEAS)**, a multi-country longitudinal study exploring gender socialization and its implications for adolescent health and wellbeing.



Quantitative surveys examined VYAs' social context, health-related topics, gender attitudes, behaviors and norm perceptions. Additional questions were added as adolescents aged to assess pregnancy, contraceptive use and empowerment.

We stratified analysis by school status (IS and OOS) and tested for interactions by baseline age (<12 vs. ≥12) and sex. Results are based on intention-to-treat analysis.

REFERENCES

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FINDINGS

Puberty and SRH Knowledge and Attitudes

- Knowledge about where to get information about menstruation and HIV knowledge improved for both IS and OOS three months post intervention (W2), and the effect was sustained for IS adolescents at W3.
- Pregnancy-related knowledge increased among IS and OOS adolescents at W2, however this gain was sustained only for the IS adolescents at W4 and W5.
- Embarrassment about accessing contraception decreased among OOS girls three months post intervention as well as one- and two-years post intervention.

	Effect of intervention relative to control group							
	In-school (IS)				Out-of-school (OOS)			
	W2	W3	W4	W5	W2	W3	W4	W5
Menstrual period knowledge	✓	✓			✓ < 12 yrs			
Pregnancy knowledge	✓		✓ <12 yrs	✓ girls	✓			
HIV knowledge	✓	✓ ≥ 12 yrs			✓			
Embarrassed to get contraception (girls only)					✓	✓	✓	

Assets and Agency

- Novel impact on body satisfaction among IS adolescents two-years post intervention.
- Sustained impact on feelings of connectedness with caregivers for OOS adolescents, while for IS adolescents this was observed at W2 and W4.
- Communication about contraception increased more among OOS girls and younger OOS adolescents receiving the intervention relative to the control, and this effect was sustained for younger OOS adolescents at W3 and W5.

	Effect of intervention relative to control group							
	In-school				Out-of-school			
	W2	W3	W4	W5	W2	W3	W4	W5
Body satisfaction			✓		✓ girls			
Caregiver connectedness	✓		✓		✓	✓		
Communication with others about contraception					✓ girls & <12 yrs	✓ < 12 yrs		✓ <12 yrs

Bullying and Other Forms of Violence

- Decrease in teasing, bullying and physical violence among older IS adolescents, two-years post intervention. However, this positive finding was not sustained.
- Short-term impact on OOS adolescent perpetration of teasing, bullying and/ physical violence were not sustained one-, two-, or three-years post-intervention.

	Effect of intervention relative to control group							
	In-school				Out-of-school			
	W2	W3	W4	W5	W2	W3	W4	W5
Experienced teasing and verbal bullying					✓ boys & ≥ 12 yrs			
Perpetrated teasing, bullying and/or physical violence			✓ ≥ 12 yrs		✓ boys			

Gender-equitable Attitudes and Behaviors

- Sustained improvements in attitudes towards gender equality in household chores for both IS and OOS adolescents over time.
- Improvements in gender-equitable chore sharing (reported by girls) among younger IS adolescents one-year post intervention (W3) but faded by W5.
- Three-years post intervention (W5), IS adolescents were less likely to endorse the sexual double standard, (rewarded boys for sexuality and sanctioned girls) and gender stereotypical roles (e.g., men as breadwinners).

	Effect of intervention relative to control group							
	In-school				Out-of-school			
	W2	W3	W4	W5	W2	W3	W4	W5
Attitudes towards gender equality in household chores	✓	✓	✓	✓	✓ girls	✓	✓	✓
Brothers helped with chores from sister's perspective		✓ <12 yrs						
Attitudes/beliefs about: (1) Sexual double standard; (2) Gender-stereotypical roles				✓				

KEY FINDINGS & IMPLICATIONS

Growing Up GREAT! had immediate and sustained impact on a range of sexual and reproductive health and gender equity outcomes among a cohort of very young adolescents in Kinshasa, though differential impacts were seen by school status, sex, and age. In particular, adolescents' support for gender-equitable attitudes and behaviors, sexual and reproductive health knowledge and behaviors, feelings of caregiving connectedness, and body satisfaction were shown to be sustained. These results affirm the potential impact of continued investment in VYA programming that is sustained over a longer period to improve sexual and reproductive health outcomes for adolescents.

