



# The Global Early Adolescent Study

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Population, Family and  
Reproductive Health



World Health  
Organization

# The Gendered Lives of Young Adolescents

## Early Findings from the Global Early Adolescent Study

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# Why Early Adolescence?

10-14 Years Old



- Among most critical ages of human development, yet poorly understood
- Standard biological processes
- Varied social contexts
- Solidification of gendered norms and roles

# Study Goals



The GEAS seeks to understand the factors in early adolescence that shape healthy development in the adolescent years.

- Longitudinal research study
- Global comparison
- Evaluating the impact of gender transformative interventions



# Formative Research: Products



- Systematic review exploring factors shaping gender norms among early adolescents
- Journal of Adolescent Health Special Supplement
  - 1 editorial
  - 3 commentaries
  - 1 review
  - 6 publications of Qualitative Findings
- Four methodology papers on: Gender Norms scales (Population Health), ACEs (*JAH*), empowerment (*forthcoming*) and vignettes (*forthcoming*)

# Longitudinal Research

# What are the Central questions of the GEAS?

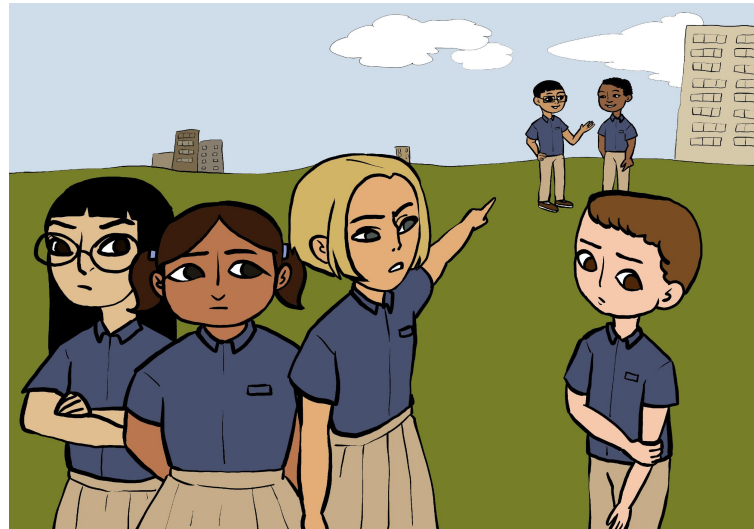
- What are the factors related to gender norms?
  - How do they vary by site?
- How do gender norms & perceptions of gender equality evolve over time?
- How do gender norms & perceptions of gender equality at the individual and community levels relate to adolescent health outcomes over time?
  - How do these influences vary by site?
- How do gender transformative interventions...
  - shift gender norms?
  - impact health trajectories for boys and girls?



# Survey Instruments

Three components:

- Health & behavior instrument
- Gender norms scales
- Vignettes-based measure of gender equality





# Key Outcomes



Sexual and  
reproductive  
health



Body comfort  
and pubertal  
satisfaction



Gender-based  
and interpersonal  
violence



Mental  
health



School  
retention

# Longitudinal Research Sites



# Study Design: Longitudinal cohort

- 1,400 adolescents 10-14 years/site
  - 2,800 for intervention sites
- Sampling
  - Urban
  - Low income sections of each city
  - Recruitment:
    - Mostly school based
    - Subsample of out of school adolescents in Kinshasa.
  - 3 to 5 rounds of approximately annual data collection

# Measuring Empowerment in Early Adolescence



# GEAS Empowerment Measures

## Freedom of Movement

Can you tell me how often you are allowed to do the following alone (without an adult present)?

Go to after-school activities

- Go to the community center/youth center
- Visited a friend of the opposite sex

## Voice

- My parents ask for my opinion on things
- My friends ask my advice when they have a problem
- I can ask adults for help when I need it

## Decision

How often are you able to make the following decisions on your own?

- What to eat when you are not home
- Who you can have as friends

# GEAS Empowerment Framework

## Opportunity Structures

Political

Cultural

Legal

Family

Economic

Education

Social Capital

### Freedom of Movement

- Ability to move autonomously within the environment

### Voice

- Ability to express opinions and be heard
- Ability to express needs and desires

### Decision-Making

- Ability to make decision that govern daily life

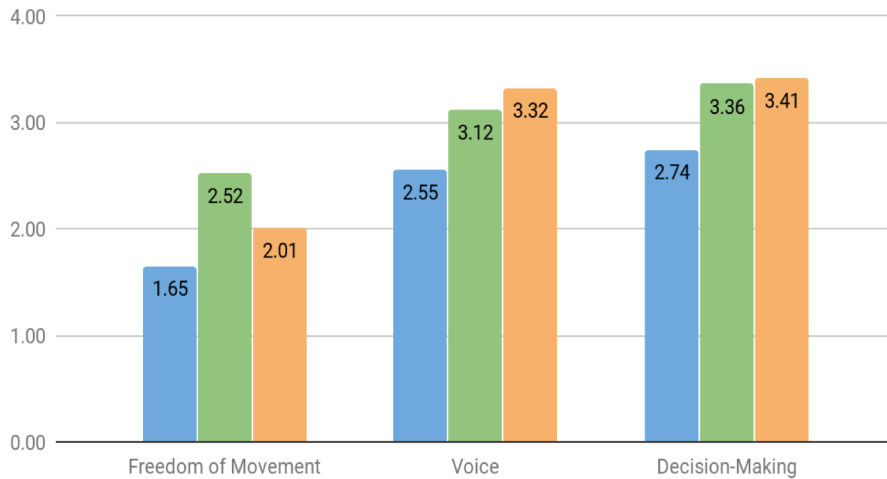
Achievement  
of desired  
outcomes

# Empowerment Findings

## Distribution of Agency Domains by Site

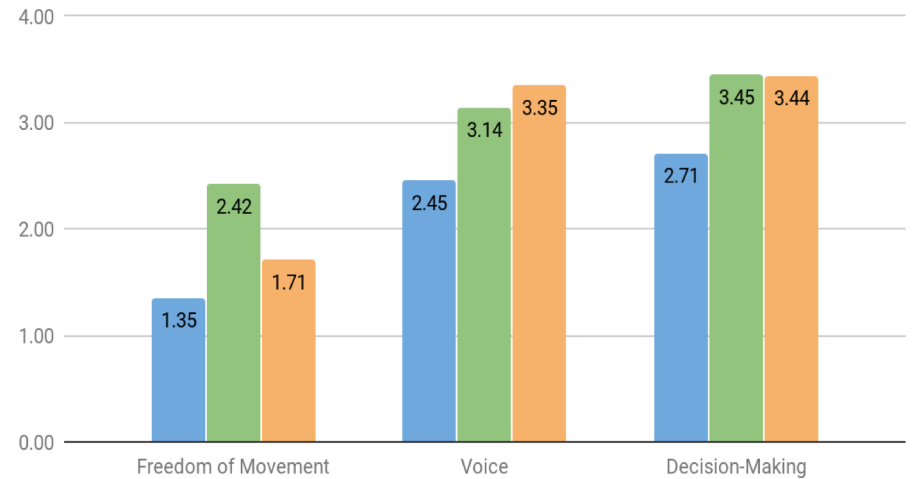
Boys' Agency by Domain and Site

Kinshasa Shanghai Cuenca



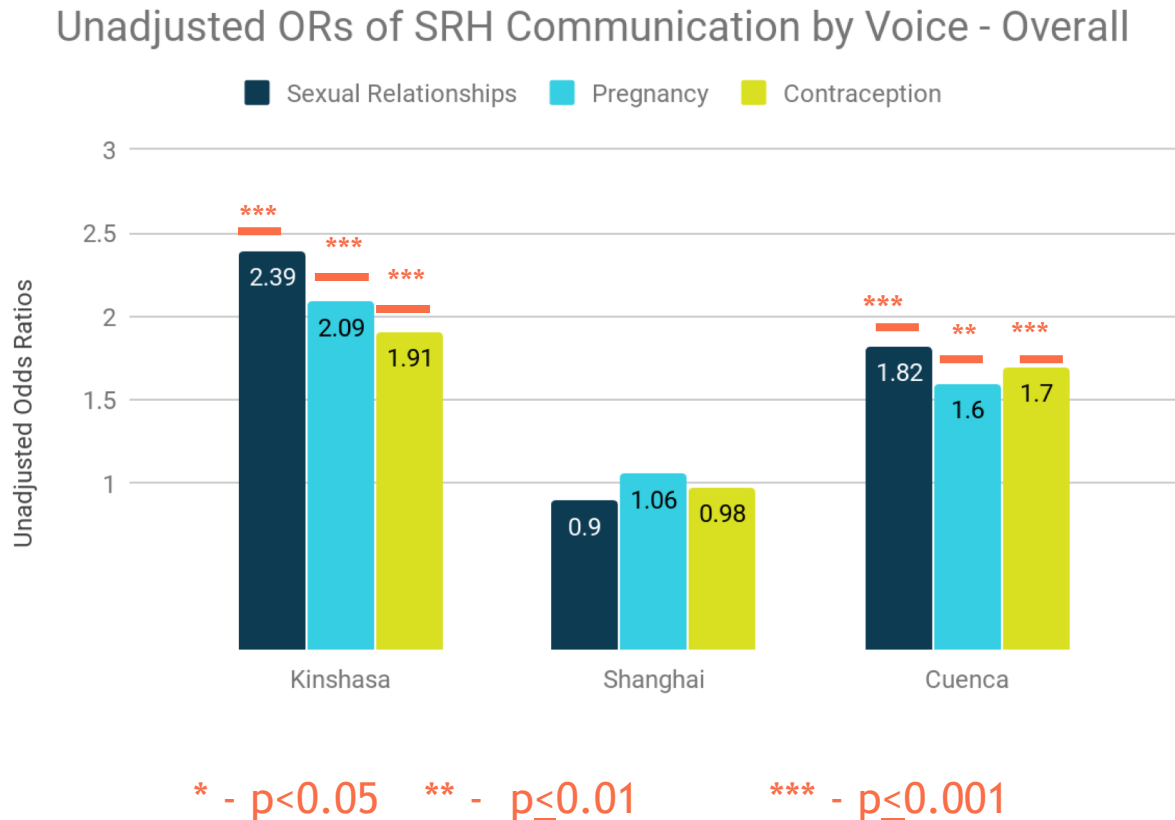
Girls' Agency by Domain and Site

Kinshasa Shanghai Cuenca



# Empowerment Findings

## Links Between Voice & Communication about SRH

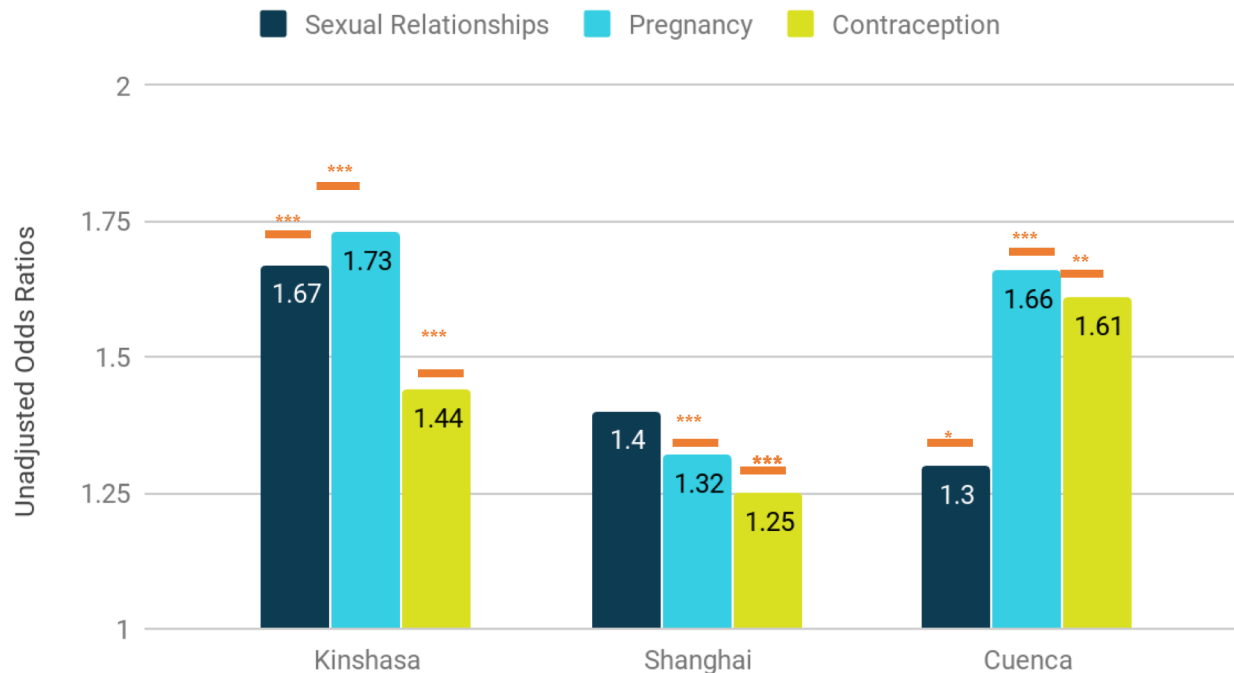




# Empowerment Findings

## Links Between Decision & Communication about SRH

Unadjusted ORs of SRH Communication by Decision - Overall



\* -  $p < 0.05$

\*\* -  $p \leq 0.01$

\*\*\* -  $p \leq 0.001$

# Adverse Childhood Experiences (ACEs)

# Background

- The associations between ACEs exposures and health outcomes in childhood less well described than in adulthood
- Few studies examining ACEs impact on health in LMICs
- There appears to be a dose-response relationship among *adults* in high-income countries between ACES exposures and a range of negative health outcomes



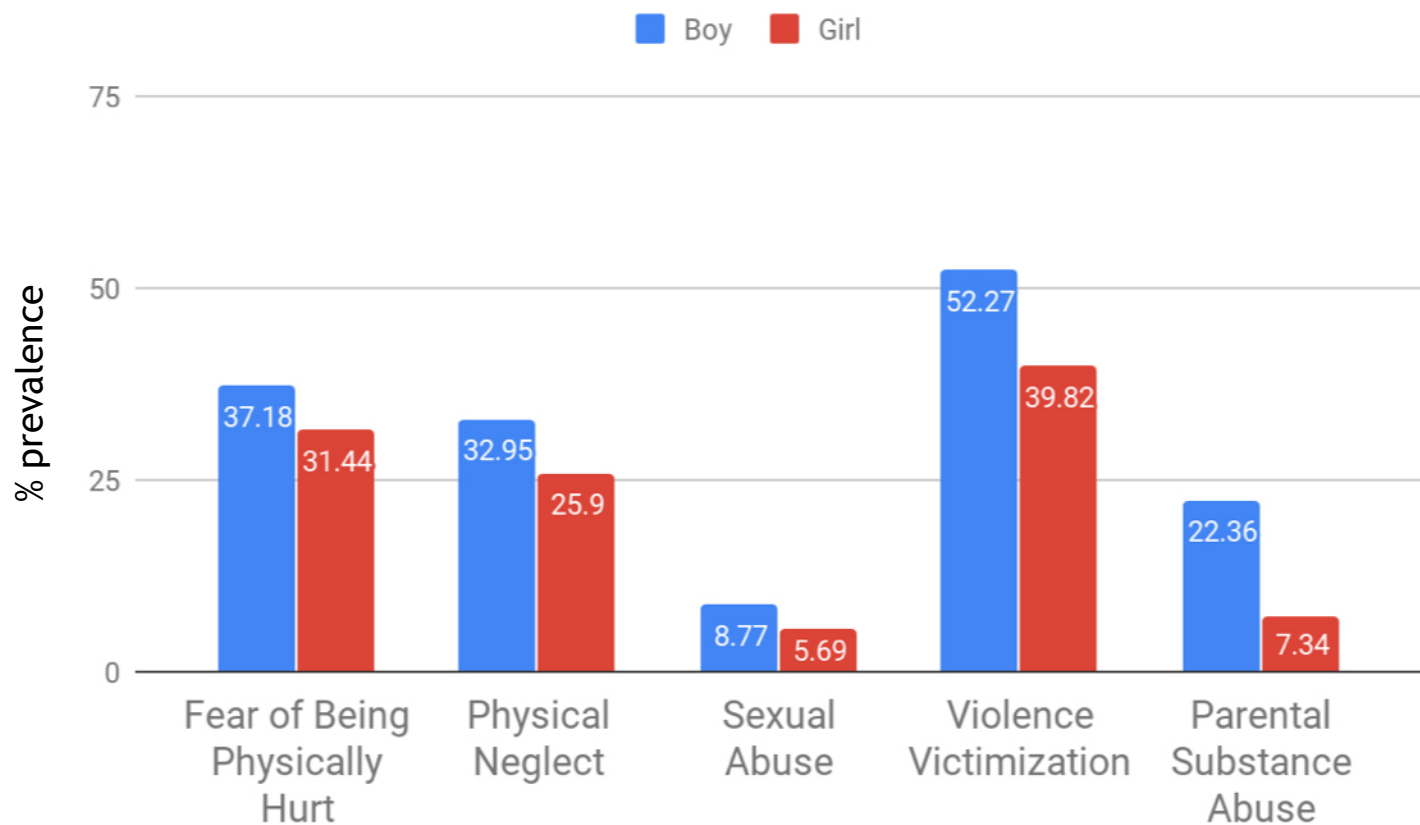
# Background

- N=1,284 from GEAS pilot data
- 14 sites\* on 5 continents
- Objective: Assess prevalence of ACEs among adolescents 10-14
  - Evaluate their associations with:
    - Depressive Symptoms
    - Violence

\* - Baltimore, USA; Cuenca, Ecuador; Cochabamba, Chile; Ghent, Belgium; Edinburgh, Scotland; Assiut, Egypt; Ouagadougou, Burkina Faso; Kinshasa, DRC; Cape Town, South Africa; Blantyre, Malawi; Ile-Ife, Nigeria; Nairobi, Kenya; Shanghai, China; Hanoi, Vietnam



# ACEs Prevalence by Sex



# ACEs and Depressive Symptoms

## Exposure-Response Association

	Overall <sup>a</sup>	Boys <sup>b</sup>	Girls <sup>b</sup>
Depressive Symptoms	aRR (95% CI)	aRR (95% CI)	aRR (95% CI)
0	Ref	Ref	Ref
1 - 3	1.23 (1.14, 1.33)	1.22 (1.10, 1.36)	1.25 (1.12, 1.40)
> 3	1.70 (1.54, 1.88)	1.59 (1.38, 1.82)	1.88 (1.62, 2.19)

*Covariates: a: sex, country, family wealth, education attainment.*

*b: country, family wealth, education attainment.*

# ACEs and Depressive Symptoms

## Exposure-Response Association

	Overall <sup>a</sup>	Boys <sup>b</sup>	Girls <sup>b</sup>
Violence Perpetration Past 6 months	aRR (95% CI)	aRR (95% CI)	aRR (95% CI)
No	<i>ref</i>	<i>ref</i>	<i>ref</i>
Yes	1.40 (1.32, 1.49)	1.46 (1.34, 1.59)	1.33 (1.21, 1.45)

Covariates: *a*: sex, country, family wealth, education attainment.

*b*: country, family wealth, education attainment.

# Key Takeaways: ACEs

- ACES exposures are high for young adolescents living in impoverished communities
- Boys consistently report more adverse childhood exposures than girls
- ACEs exposure is positively associated *internalizing behaviors* (depressive symptoms) for girls and *externalizing behaviors* (violence perpetration) for boys

# Acknowledgements

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# THANK YOU

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University of Malawi College of Medicine  
University of Ouagadougou  
University of St Andrews  
University of the Western Cape HIV & AIDS Programme  
Vietnam Academy of Social Sciences

## ...to our donors

The Bill and Melinda Gates Foundation  
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Save the Children  
United Nations Population Fund (UNFPA)  
United States Agency for International Development (USAID)  
World Health Organization  
The Ford Foundation  
Flemish Government  
Scottish Government

# Thank You



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