Capacity Building Outline



LEARNING OUTCOMES

By the end of these modules, community frontliners should be able to...

- 1. Provide clear and accurate sexual and reproductive health information to adolescents
- 2. Develop communication skills and confidence in conversing with adolescents on sexual and reproductive health
- 3. Promote positive attitude and behaviors in discussing adolescent sexual and reproductive health topics with adolescents and their communities.

MODULES

- A. Adolescent Health Education and Practical Training (ADEPT) Recommended for health workers only; available % DOH Academy
 - a. Adolescent Friendly Health Facilities
 - b. Appropriate and Inappropriate Practices for Adolescent Friendly Service
 - c. Characteristics of Adolescent Friendly Healthcare Providers at the Reception
 - d. Healthcare Providers' Attitudes
 - e. Steps in an Adolescent Friendly Encounter

B. Reproductive Health for Adolescents

- 1. The Nature of Adolescence
 - a. Biological and psychological changes
 - b. Desirable health status and adolescent reproductive health
 - c. Reproductive rights of adolescents
- 2. Adolescent Vulnerabilities, Risk-Taking Behaviors, and their Consequences
 - a. Vulnerabilities of adolescents
 - b. Factors driving adolescents to engage in risky sexual behavior (i.e. poverty, domestic violence, dysfunctional family, abuse, dropping out from school, lack of knowledge, etc.)
 - c. Risk-taking behaviors
 - d. Consequences of risk-taking behaviors and vulnerabilities
- Adolescent Behavior and Life Skills
 - a. Psychological and behavioral concerns
 - b. Like skills necessary for health development
 - c. Safe online and offline engagement
- 4. Communicating with the Adolescent Client
 - a. Establishing trust with the adolescent
 - b. Behaviors conducive to counseling adolescents
 - c. Counseling techniques to be used with adolescents
- 5. Safer Sex and Protection for Adolescents

- a. Safer sex messages and techniques for prevention
- b. Reasons why adolescents may not practice safe sex
- 6. Contraceptive Options for Adolescents
 - a. Importance of delaying child-bearing
 - b. Contraceptive options
 - c. Common side effects and their impacts on adolescents
 - d. Responding to misconceptions and rumors
- 7. STI/HIV and Adolescents
 - a. Impact of STI/HIV on adolescents
 - b. Syndromic and clinical management of STIs
- 8. Counseling the Adolescent on Safer Sex
 - a. RH counseling and factors influencing counseling outcomes
 - b. How to counsel adolescents about safer sex and protections
 - c. Ways to counsel young men
- 9. Sexual Identity and Orientation
 - a. Different types of sexual expression and orientation
 - b. Issues of sexual expression or orientation
- 10. Physical, Emotional, or Sexual Abuse
 - a. Types of abuse
 - b. Sexual abuse as a reproductive health issue
 - c. Online sexual abuse and exploitation
 - d. Physical and behavioral indicators of abuse
 - e. How to screen for abuse
 - f. Responding to survivors of abuse
- 11. Pregnancy, Birth, and Postpartum Issues
 - a. Components of routine prenatal care for adolescents
 - b. Physical and emotional needs during labor and delivery
 - c. Adolescent needs during the postpartum depression
 - d. Parenting and infant feeding
- 12. Providing Adolescent Services
 - a. Ways to make programs youth-friendly
 - b. Evaluating and planning youth-friendly programs, projects, activities, and services

APPENDIX 5A. GUIDE FOR EVALUATING THE EFFECTIVENESS OF TRAINING AND CAPACITY BUILDING SESSIONS ON ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH

The effectiveness of training and capacity building sessions for KADA Center frontliners and KADA Network members shall be evaluated by measuring the improvement in the beneficiaries' nutrition-related knowledge, attitudes, and practices (KAP) before and after the conduct of these activities.

Operational definition

- Knowledge refers to the degree with which beneficiaries understand essential adolescent and adolescent sexual and reproductive health-related information. This will be measured using a quiz-type knowledge assessment, wherein participants will provide answers to the knowledge area being asked.
- Attitudes refer to participants' emotional, motivational, and perceptive beliefs on adolescent
 and adolescent sexual and reproductive health-related matters that positively or negatively
 influence their behavior. This will be measured using a three-point scale for every item,
 beneficiaries will indicate their perceived belief or level of agreeability to the statement given.
- Practices refers to the beneficiaries' observable actions, habits, or routines that could affect
 their adolescent clients' sexual and reproductive health. This will be measured in terms of
 frequency with which the practices are being observed: Always, sometimes, or never.

Design of effectiveness evaluation

To determine the change in KAP, implementers will conduct a pre-test and post-test among training or capacity building session participants. The pre-test results will be considered the baseline KAP. The post-test results will comprise the outcome KAP. The difference between the pre- and post-test results may indicate whether training and capacity building sessions have been helpful in improving the KAP of KADA Center frontliners or KADA Network members.

Survey instrument

A survey instrument will be used to measure the baseline and outcome KAP of KADA Center frontliners and/or KADA Network members. The same survey instrument will be administered for the pre- and post-test implementation.

The first section of the instrument will measure the participants' level of knowledge. Questions relevant to adolescents and adolescent sexual and reproductive health will be provided, and beneficiaries will be tested on whether or not they are knowledgeable of the statements by providing an answer.

The second second of the instrument will measure participants' attitudes towards adolescents and adolescent sexual and reproductive health. The beneficiaries will indicate their perceived level of agreement for each of the provided statements or questions.

Finally, the last section of the instrument will collect data specific to the participants' practices or patterns of nutrition-related behavior. Relevant statements will be provided and the participants will indicate whether they practice the said statements Always, Sometimes, or Never.

Simple analysis of results

Pre- and post-test results of participants will be graded according to the **GRADING GUIDE** below. After all portions have been graded, scores for each portion of the pre- and post-test will be categorized according to the **SCORE SCALE** below. Improvements in knowledge, attitudes, and practices will be dependent on whether scores move upward across the score scale, i.e. from low to average, low to high, or average to high.

TYPE OF QUESTION	GRADING GUIDE	SCORE SCALE
Knowledge	Correct answer = +1 point Other or blank answer = 0 points	8 to 10 points = High 3 to 7 points = Average 0 to 2 points = Low
Attitudes	Agree = +1 point Neither agree nor disagree = 0 points Disagree = -1 point	7 to 10 points = High -6 to 6 points = Average -10 to -7points = Low
Practices	Always = +1 point Sometimes = 0 points Never = -1 point	7 to 10 points = High -6 to 6 points = Average -10 to -7points = Low

APPENDIX 5B. INSTRUMENT FOR PRE- AND POST-TRAINING KAP TESTING

Cover spiel

Good day!
The local government of [City/Municipality] regularly provides training or capacity building sessions for members and frontliners of the Key Assistance for Developing Adolescents (KADA) Network. To complement service provision and community engagement activities of the KADA Network, regular training is provided to frontliners and other KADA Network members to update information and provide a refresher course on adolescent friendly approaches.
As a participant of the [insert name of training] capacity building session, you are requested to answer this short survey. The survey intends to determine the relevant knowledge, attitudes, and practices that KADA Center frontliners and members will need to focus on during and after the capacity building session.
Rest assured that the information you will be sharing will be treated with care and confidentiality, and will be used solely to improve KADA Network services, including current and future capacity building sessions.

Socio-Demographic Questions

Thank you.

What is your name?	
What is your sex?	□ Male □ Female □ Intersex
How old are you?	years old
What is your position?	
Where are you assigned? Indicate name and location of KADA Center	
How many other training or capacity building sessions on adolescent friendly approaches have you attended before this one?	sessions

Survey Proper

General Directive for Survey Implementers: This is a self-administered survey targeted toward KADA Center frontliners and KADA Network members who will or have participated in your training or capacity building session. This test is designed to be answered before and after the training or capacity building session, and measures key knowledge, attitudes, and practices that training participants will need in the provision of day-to-day services and operations of the KADA Network. Note the mode of response and grading guide below:

QUESTION TYPE	MODE OF RESPONSE	GRADING GUIDE
KNOWLEDGE	Open-ended Allow participants to formulate their own answers for each question. Correct answers are provided in the guide below but are to be used for grading purposes only, and are not to be shown to participants	 Correct answer = 1 point Other or blank answer = 0 points
ATTITUDES	Scale Allow participants to choose from one of three provided responses	 Agree = +1 point Neither agree nor disagree = 0 points Disagree = -1 points
PRACTICES	Scale Allow participants to choose from one of three provided responses	 Always = +1 point Sometimes = 0 points Never = -1 points

	TARGET INDICATOR	ITEM	RESPONSE	SCORE	
KNO	KNOWLEDGE				
1	Frontliner competence - The nature of adolescence	services are adolescent-	Leave blank for participant response Grading guide: Correct answer: Adolescents face specific risks and vulnerabilities, and need access to support, information, and services. Frontliners'		

			attitudes can deter or attract adolescents seeking help. Other or blank answer	
2	Frontliner competence - Adolescent vulnerabilities	Provide two or more factors that can increase risky sexual behavior in adolescents.	Leave blank for participant response Grading guide: □ Correct answer: Any two of the following: - Poor access to SRH information - Substance use - Parental neglect or domestic violence or abuse - Poverty and poor economic and social support □ Other or blank answer	
3	Frontliner competence - Adolescent behavior	Provide two or more attitudes which would make adolescents feel welcome.	Leave blank for participant response Grading guide: Correct answer: Any two of the following: Openness Friendliness Ensuring privacy and confidentiality Respect Honesty Empathy or understanding Other or blank answer	
4	Frontliner competence - Adolescents' rights	True or False: According to the RH Law (RA 10354), adolescents are entitled to information on sexual and reproductive health through age- and development-	Leave blank for participant response Grading guide: Correct answer: True Other or blank answer	

		appropriate reproductive health education, counseling, and more.		
5	Frontliner competence - Adolescent protection from violence	Provide two or more signs that an adolescent is in an abusive relationship.	Correct answer: Any two of the following: - The partner tries to coerce or force them into sexual activity when they don't want it or aren't ready - The partner refuses to use contraception or protection against STIs during sexual activity - The partner is jealous, possessive, or controls their texts or social media - The partner doesn't want them to spend time with family or friends - The partner hits them or physically harms them in any way - The partner makes threats □ Other or blank answer	
6	Frontliner competence - Communicating with adolescents	Provide two or more communication approaches that can prevent or deter adolescents from seeking help or confiding in adults.	Leave blank for participant response Grading guide: Correct answer: Any two	

			of the following: - Judging - Unfriendliness - Not listening, scolding, or reprimanding - Disrespect - Dishonesty - Lack of privacy or confidentiality Other or blank answer	
7	Frontliner competence - Gender sensitivity and SOGIE	What does SOGIE mean?	Leave blank for participant response Grading guide: Correct answer: Sexual orientation, gender identity, and gender expression Other or blank answer	
8	Frontliner competence - Adolescent pregnancy	Provide two or more of the repercussions of adolescent pregnancy.		

			experiencing violence in a marriage or relationship Other or blank answer	
9	Frontliner competence - Adolescent HIV or STI infection	Aside from abstinence or not having sex, what is the best way for an adolescent to prevent STI or HIV infection?	Leave blank for participant response Grading guide: Correct answer: Using a condom during oral, anal, or vaginal sex Other or blank answer	
10	Frontliner competence - Abuse of adolescents	What are the two most common forms of adolescent sexual abuse?	Leave blank for participant response Grading guide: Correct answer: Incest and online sexual exploitation and abuse Other or blank answer	
тот	AL			
ATT	ITUDES			
11	Frontliner attitudes - Adolescent capability for decision making	I believe that adolescents can make responsible decisions	□ Agree□ Neither agree nor disagree□ Disagree	
12	Frontliner attitudes - Adolescents and diversity	I believe that helping adolescents understand their sexual orientation, gender identity, or gender expression is part of my responsibility	□ Agree□ Neither agree nor disagree□ Disagree	
13	Frontliner attitudes - Willingness to talk about adolescent SRH	I believe that adolescents are not too young to be thinking about sex, sexuality, or sexual and reproductive health	□ Agree□ Neither agree nor disagree□ Disagree	

14	Frontliner attitudes - Provision of information or services	I believe that talking about sex, sexuality, or SRH to adolescents will not encourage sexual behavior	□ Agree□ Neither agree nor disagree□ Disagree	
15	Frontliner attitudes - Adolescents' privacy and confidentiality	I believe that adolescents need privacy to feel comfortable receiving SRH information or services	□ Agree□ Neither agree nor disagree□ Disagree	
16	Frontliner attitudes - Sex positivity	I believe that adolescents are more likely to engage in risky sexual behavior when they are too scared to talk to a trusted adult	□ Agree□ Neither agree nor disagree□ Disagree	
17	Frontliner attitudes - Non-judgmental communication	I believe that adolescents who ask about sex, sexuality, or SRH are responsible, not promiscuous or reckless	□ Agree□ Neither agree nor disagree□ Disagree	
18	Frontliner attitudes - Stigma and discrimination against adolescents	I feel comfortable providing SRH information or services to adolescents	□ Agree□ Neither agree nor disagree□ Disagree	
19	Frontliner attitudes - Abuse of adolescents	I believe that most adolescents don't lie about being abused	□ Agree□ Neither agree nor disagree□ Disagree	
20	Frontliner attitudes - Active adolescent participation & leadership	I believe that it is important for adolescents and young people to participate in the KADA Network	□ Agree□ Neither agree nor disagree□ Disagree	
тоти	AL			
PRAG	CTICES			
21	Frontliner practices - Adolescent capability for decision making	In the past 30 days, I have asked all my adolescent clients what their goal is in accessing adolescent friendly services	□ Always□ Sometimes□ Never	

22	Frontliner practices - Adolescents and diversity	In the past 30 days, I have openly conversed with adolescents on their sexual orientation, gender identity, and/or gender expression.	□ Always□ Sometimes□ Never
23	Frontliner practices - Willingness to talk about adolescent SRH	In the past 30 days, I have felt comfortable discussing adolescent SRH	□ Always□ Sometimes□ Never
24	Frontliner practices - Provision of information or services	In the past 30 days, I have been able to provide complete, accurate, and appropriate information and services to adolescent clients.	□ Always□ Sometimes□ Never
25	Frontliner practices - Adolescents' privacy and confidentiality	In the past 30 days, I have ensured adolescents' privacy and confidentiality by not speaking about what they told me to other people.	□ Always□ Sometimes□ Never
26	Frontliner practices - Sex positivity	In the past 30 days, I have been honest when answering adolescents' questions, even if I did not necessarily agree with them.	□ Always□ Sometimes□ Never
27	Frontliner practices - Non-judgmental communication	In the past 30 days, I have asked questions and listened more than I have spoken when adolescents seek information or counseling.	□ Always□ Sometimes□ Never
28	Frontliner practices - Stigma and discrimination against adolescents	In the past 30 days, I have provided the necessary information, referral, or services to all adolescents who have sought help.	□ Always□ Sometimes□ Never
29	Frontliner practices - Abuse of adolescents	In the past 30 days, I have treated adolescents who said they were abused with understanding and empathy.	□ Always□ Sometimes□ Never

30	Active adolescent	In the past 30 days, I have encouraged adolescents to be more involved in our KADA Network volunteer activities.	☐ Always☐ Sometimes☐ Never	
TOTAL				

APPENDIX 5C. KNOWLEDGE, ATTITUDES, AND PRACTICES (KAP) MONITORING SHEET

[Name of City/Municipality] KADA Network

Knowledge, Attitudes, and Practices (KAP) Monitoring Sheet

Training Activity:			
Date:			

Score Scale

KNOWLEDGE		АТТІТ	UDES	PRACTICES		
If the total score is	Then the rating is	If the total score is	Then the rating is	If the total score is	Then the rating is	
0 to 2	LOW	-10 to -7	LOW	-10 to -7	LOW	
3 to 7	AVERAGE	-6 to 6	AVERAGE	-6 to 6	AVERAGE	
8 to 10	HIGH	7 to 10	HIGH	7 to 10	HIGH	

Legend

IMP (Improved)	For scores which have moved upward from pre- to post-test (Ex. Low to average, low to high, average to high)
N/C (No change)	For scores which have remained in the same range from pre- to post- test (Ex.Low to low, average to average, high to high)
REG (Regressed)	For scores which have moved downward from pre- to post-test (Ex. High to average, high to low, average to low)

Monitoring Proper

			PRE- AND	POST-TR	AINING KA	AP SURVE	RESULTS	S	
Name of Participant	KNOWLEDGE			ATTITUDES			PRACTICES		
	PRE	POST	DIFF	PRE	POST	DIFF	PRE	POST	DIFF
Name	Medium	High	IMP	High	High	N/C	Medium	High	IMP
Name	Low	Medium	IMP	Low	Medium	IMP	Low	Medium	IMP
Name	Medium	High	IMP	Medium	High	IMP	Medium	High	IMP
Name	Medium	High	IMP	Medium	Low	REG	Medium	High	IMP
Name	Low	High	IMP	Low	High	IMP	Low	High	IMP
Name	Low	Medium	IMP	Low	Medium	IMP	Low	Medium	IMP
Name	Low	Low	N/C	Low	Low	N/C	Low	High	IMP
Name	Medium	Medium	N/C	Medium	Medium	N/C	Medium	High	IMP
Name	High	Medium	REG	High	Medium	REG	High	Medium	REG
Name	Low	Medium	IMP	Low	Medium	IMP	Low	Medium	IMP
% with improve	% with improved (IMP) KAP		70%			50%			90%

Prepared by:	Noted by:		
Lood Cocilitator			
Lead Facilitator	KADA Network Head of Secretariat		
Signature over printed name	Signature over printed name		