



Children First Agency

YOUTH VISION PROJECT FINAL REPORT

YOUTH VISIONING FINAL REPORT TEMPLATE

The following is the minimum amount of information Youth Visioning seeks when handing in your activity and financial report as part of your final deliverables for your final payment. Please use it as a guide as you may have other inputs to add.

1. Title of project: Youth MSM Empowerment Project

2. Lead and partner organizations: Children First Agency

3. Summary of the project:

Explain why you decided to implement this project. What are the objectives and overall goal(s)?

In the last two years we have undertaken MSM projects where we engage this vulnerable group in awareness of dispelling myths and misconceptions relating to HIV/AIDS, supporting mechanisms which will allow for a sustained holistic enabling environment. Fighting unnecessary HIV/AIDS related discrimination, (aligning our directives with the revised National MSM strategy 2012 we also seek to scale up VCCT) provided counselling and prevention and VCCT services. Our experience so far has unearthed valuable information as we have observed that these young men are in urgent need of services that empower them to develop good health seeking behaviours and accurate perceptions of their risk for infection. There has also been increased psychosocial and or counselling support to help MSM work through sexual identity issues as well as other self inducing development issues. Additionally, presentations by the agency in various schools to address the emerging trend of same sex relationships and bullying through the use of creative and effective edutainment pieces through peer education done by the Bashy Bus Kru.

The MSMs rights and protection are constantly under threat as such the services offered will include mental health support as families of these young men also require support to become more tolerant and nurturing. Further the systems responsible for their care and protection must become more sensitive to their needs. A significant number of the adolescent MSM we have engaged have been further marginalized through homelessness, exclusion from school and poor quality education.

Project Objectives

- To strengthen knowledge and skills of our target group (50 MSM aged 17-25 years old) on HIV/AIDS and other STI's
- To build the capacity of 20 key stakeholders to better relate to and interact with MSM, through targeted intervention
- To increase the availability of psycho-social support services for young MSM through advanced peer educators training for 10 MSM

Project Goal:

- To strengthen existing programmes in providing care, support and advocacy directives for the MSM population by addressing some key vulnerabilities of young MSM, strengthen linkages with health service providers and educate selected high schools in the corporate area to better serve and protect these young people.

The entire series of project activities were organized by Children First.

Objective 1: *To strengthen knowledge and skills of our target group (50 MSM aged 17-25 years old) on HIV/AIDS and other STI's*

Activity1: Develop youth friendly drama presentation:

Status: Successfully completed

A 20 minute youth friendly presentation was developed in consultation with the Children First Mobile Reproductive Health Information Service – Bashy Bus Peer Educators at the Bashy Bus HQ in Kingston, Jamaica. The presentation sought to utilise the performing arts - particularly drama, poetry and songs - to promote and create an awareness of MSM issues. This presentation was also informed based on focus discussions with youth representatives of the MSM population where they highlighted the issues that they have experienced and continue to endure in some instances. The cultural piece was successfully developed.

Activity 2&3 Performance of drama & Audience Interaction

Status: Successfully completed

A series of pilot testing of the presentation was done at 2 secondary schools (*1 rural and 1 urban*) with various youth audiences as well as 2 distinct groupings of MSM's during the period July to October 2012. The feedback was very encouraging as the audience related that the messages were quite clear and the issues brought to the fore were "true-to-life". These pilot tests brought to the fore the importance and ongoing need for psychosocial testing and support especially amongst the MSM groupings, as the presentations created the space for them to articulate their issues and question where they can go to get support/assistance.

Following the pilot, the drama presentation was performed a total of 4 times in 2 urban (Kingston based) secondary schools as well as with stakeholders groups and MSM during November 2012 to February 2013. From this activity over 1,000 persons (Students, adults and youth MSM's) benefitted from the presentations and the interactions that followed the drama pieces. In relation to discussions in the schools, they were very lively as the piece highlighted the realities of same sex situations with emphasis on Youth MSM's in the context of the school setting and the challenges these youngsters often endure with the issues of sexuality. Interestingly, at the two targeted schools the Administrators were initially uncertain as to how the students would respond and in one school they even opted to have the piece undertaken for a select group of participants. None-the-less, the presentation kept the students focused and generated a lot of discussions around tolerance and discrimination and a number of the youngsters spoke of their own experiences - similar to that which the drama had initially depicted.

On the other hand, the stakeholder and MSM groups received the presentation very well and commented that this was a very innovative and non-threatening means by which to commence the discussion around the issue of sexuality, stigma and discrimination and most importantly access

to health services. Due to the numerous feedback and requests received for additional presentations of the drama piece, this component of the project was successfully implemented.

Activity 4: Empowerment Sessions with MSM:

Status: Successfully completed

For the period July to October 2012 a series of MSM empowerment sessions were undertaken at the BBK HQ in Kingston impacting **66** individuals. The sessions began with a focus group discussion in order to better understand the issues that impact and affect the MSM community and the issues that this new batch of participants experience. The main topics covered for the period included Self Efficacy; Advocacy and Risk Reduction Conversations – specifically condom negotiation, Sensitization to VCT, Advocacy, Sexuality, Basic HIV/AIDS facts, Stigma and Discrimination HIV/AIDS/STI transmission and prevention, treatment and care; Additionally, one-on-one sessions have been convened with all 66 youth as part of the overall development planning process and are held at the end of each batch of training.

Overall, the sessions were very successful and provided the opportunity to dispel myths, clarification, discuss issues relating to “anal hygiene”, created a space to examine future plans and streamline refer to national vocational training programmes such as HEART/NTA. Finally these empowerment sessions served as a catalyst in preparing them for the Voluntary Counselling and Testing (VCT) in screening HIV/AIDS and STI’ test.

Activity 5: VCCT Test:

Status: Successfully completed

A total of **36** MSM participants accessed the VCT through Children First Mobile Reproductive Health Unit - The Bashy Bus. Each participant were engaged in Pre and post test counselling and those who tested positive were referred and subsequently accompanied by a Children First team member to the public health clinic that has responsibility in the Kingston Metropolitan Region for HIV Treatment and Care.

Objective 2: *To build the capacity of 20 key stakeholders to better relate to and interact with MSM, through targeted intervention*

Activity 1: Focus Group Discussions with MSM

Status: Successfully completed

A series of focus group sessions were undertaken with the total group of 66 youth MSM’s who were engaged in the MSM Empowerment Training Sessions for the period July to October 2012, and served to provide the baseline information, which was required to devise the intervention to make it culturally appropriate while addressing the emerging issues and trends.

Activity 2: 1 Workshop with Key Stakeholders

Activity 3: 1 Workshop with MSM & Stakeholders

Status: Both activities successfully completed

This activities were undertaken over a 2-day period in Kingston with a total of 25 persons comprising of youth MSM, representatives from the Office of the Children’s Advocate, Children’s Registry, Ministry of Health Comprehensive Clinic, Child guidance Counselling Clinic, Child Development Agency, Bureau of Women’s Affairs (Men’s Desk), Council of Voluntary Social Services, Dean of Disciplines and Counsellors from 4 High Schools and two representatives from the Jamaica Constabulary (Police) Force as well as Out of School Youths.

The sessions focused on understanding the target population, the existing and emerging trends relating to the population as well as sought to explore workable solutions to the challenges (including stigma and discrimination) faced by the group. The youth participants were very willing to share their experiences and make recommendations to the various organizations to how best to meet the needs of their target group. The youngsters were also very excited for the space provided for them to learn firsthand about the myriad of services available through the various stakeholders. On the other hand, the stakeholders described the sessions as very rich learning experiences which enabled them to better understand the barriers which they sometimes “unknowingly” create in serving the population.

Overall, there was a high level of commitment from the various stakeholder groups to review the recommendations and to internally explore further training for their staff and to collaborate with Children First on other similar intervention in order to keep current in their quest to meet the needs of this population.

Activity 4: Develop health care providers listing

Status: Successfully completed

This component comprises of approximately 20 health care providers particularly in the Kingston and St. Andrew Region from which the project operates. Based on our ongoing partnership with these health care providers, individual contacts have been forged which makes the referral processes much easier and smoother. On a needs basis this health care provider listing has been distributed to MSM participants.

Objective 3: *To increase the availability of psycho-social support services for young MSM through advanced peer educators training for 10 MSM*

Activity 1: Advanced Peer Education Sessions

Status: Successfully completed

A total of 17 MSM have participated in the Advanced Peer Education training with 16 successfully completing the process. They have been offering support to their peers and interestingly they have also been volunteering to assist with the ongoing MSM Empowerment training sessions, which provide the opportunity for them to hone their peer education skills.

Additionally, they were actively engaged in the recruitment of new participants for training and are in the process of developing an advocacy campaign aimed at reducing stigma and discrimination amongst the target group. The training was however, very integral in the young MSM's overall development and has enhanced the young men's self esteem and sense of purpose.

Activity 2: Conduct Pre and Post Assessment

Status: Successfully completed

This activity was undertaken with the targeted MSM population during the period July to October 2012 and when compared, the participants' knowledge base had increased by over 60%.

Activity 3: Risk Reduction and Self Empowerment Sessions

Status: Successfully completed

This activity was undertaken with the targeted MSM population during the period July to October 2012 and was completed as part of the overall peer education training programme. It provided the opportunity for self assessments, introspection and future planning with respect to risks and the

impact it has on their health. Overall there has been reported increase in condom usage amongst the target group as well as increased discussions with their partners on the issues.

Activity 4: Mobilization of New MSM's

Status: Successfully completed

The advanced trained peer educators as well as those participating in the MSM Empowerment Sessions were very instrumental in recruiting and mobilizing additional participants for the sessions based on the positive impact the sessions have had on their overall well being.

5. Results and outcomes of the project:

Assess the results of your activities and explain whether you achieved your objectives. For each objective, explain whether:

- a) It was or was not achieved
- b) How it was or could have been achieved
- c) What would you do differently?

Project Objectives	Status	What would you do differently
<i>To strengthen knowledge and skills of our target group (50 MSM aged 17-25 years old) on HIV/AIDS and other STI's</i>	<i>Activity achieved as planned</i>	<i>With additional resources we would video the drama presentation which would enable a greater level of impact</i>
<i>To build the capacity of 20 key stakeholders to better relate to and interact with MSM, through targeted intervention</i>	<i>Activity achieved as planned</i>	<i>N/A</i>
<i>To increase the availability of psycho-social support services for young MSM through advanced peer educators training for 10 MSM</i>	<i>Activity achieved as planned</i>	<i>N/A</i>

6. Lessons learnt:

Explain some of the lessons that you learnt while implementing the project.

The following are the lessons learnt during the period:

1. The youth MSM population are desperately in need of a youth information site where reproductive health information can be shared and referrals made to service provider
2. The strategy of advanced peer education training served as a useful catalyst in achieving a multiplier effect in reaching other youth MSM's
3. The civil society and the wider community groups lack information on youth MSM's and therefore doesn't possess their own "personal perceptions" which has the ability leads to stigma and discrimination
 - a. Therefore it was important to have hosted the stakeholders workshop sessions which served to bridge those gaps and provided a greater level of understanding about this unique population
4. Reproductive Health Information cannot be a stand-alone, and therefore needs a holistic approach (e.g., food support, hygiene kits, bus-fare assistance) especially for those individuals who are most vulnerable.

5. The importance of easy access to condoms and lubricants for the population is really very integral to an intervention of this nature.
 - a. Based on partnerships with entities such as the Ministry of Health and the National Family Planning Board, we were able to secure much needed resources (in-kind) to compliment this area of our project activities
6. Behaviour change is a process and therefore there is a great need for sustained interventions especially for this highly vulnerable group of young people.

7. Future activities:

Explain the current status of the project, whether it will continue in the future and whether you and your group will implement other projects

The delivery of this targeted intervention by Children First Bashy Bus Kru created the opportunity for meaningful partnerships with other organizations such as UNAIDS, Jamaica Youth Advocacy Network (J-YAN) in undertaking other MSM targeted interventions.

Children First continues to undertake interventions with youth MSM's and other stakeholder groups especially the parents of MSM's but on much smaller scale due to the availability of resources. Additionally, given the positive impact of this particular project, the agency is poised to implement other similar interventions.

8. Conclusion

Summarize the outcome of the project including your personal thoughts and experiences.

Under this intervention, the activities created avenue for linkages and partnerships with other local and international partners including Jamaica Youth Advocacy Network (JYAN) and UNAIDS who have so far committed support for a Social Media Training for Advocacy. This intervention has been a very fruitful and rewarding experience for all stakeholders who have been involved in the process

Additionally, during the period the Agency also partnered with other entities and was able to secure and distribute approximately **488** lubricants and **907** condoms to the project participants

All-in-All, this project was very instrumental in the advancement of the Agency's work in relation to MSM Empowerment and Skills building - particularly at the outreach centre – the Bashy Bus HQ's Safe Space for Vulnerable Children and Young.

9. Financial Report

The total amount of your expenses **MUST** be in **US Dollars** and equal the **total amount** that UNESCO will give you as stated in your contract. Include:

- Expenses that you actually made
 - Expenses that you will make once you receive the final payment
 - Copies of receipts/invoices
 - Sign and date the financial statement
-

- See attached Financial Report

10. Include photos (on CD-Rom or printed) and video footage (master tape).

- Email of Photographs Attached (BBK Presentations)
- Stakeholders workshop session