



BASELINE SYNTHESIS

**“PATHWAYS TO WELLBEING,
EMPOWERMENT
AND RESILIENCE FOR ADOLESCENTS AND YOUTH
(POWER 4 AY)”**

Synthesis report

Nepal, Albania, Uganda and Bolivia
August 2022



Save the Children®

Power for AYs-Baseline Synthesis Report

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Acronyms

AY	Adolescents and Youths
COVID-19	Corona Virus Disease, 2019
FGD	Focus Group Discussion
GBV	Gender-based Violence
INGO	International Non-governmental Organization
KII	Key Informant Interview
NGO	Non-governmental Organization
PWDs	Persons with disabilities
SC	Save the Children
SDG	Sustainable Development Goal
SPSS	Statistical Package for Social Science
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
VYA	Very Young Adolescents
WASH	Water Sanitation and Hygiene
WGQ	Washington Group of Questions

1 EXECUTIVE SUMMARY

A Baseline study was carried out for Power 4 AYs program being implemented by SCI country offices in Nepal, Uganda, Albania and Bolivia. A total of 3451 AYs and 497 parents and caregivers participated in the baseline study including several participants in 69 FGDs and KII interviews between April to June 2022. The conclusive findings of the survey and the recommendations are presented below.

Disability prevalence rate stood at 10.2 % for all four countries, the lowest being in Nepal (4.4%). Gender differences in disability is found very minimal, with share of female AYs higher by 1% only. Higher prevalence of disability exists among the age group of 12 to 14 (13%) compared to all other age groups and gender.

There are **differences between persons with and without disabilities** both positively and negatively. In case of Nepal and Uganda, higher proportions of PWDs have got government and other jobs (45%/44%) and are engaged in self-employment compared to non PWDs (17%/30%), and a comparable proportion of PWDs also enjoy participation in networks and clubs. In all countries, governments have developed programs and policies to uplift PWDs but not all PWDs have been able to access them.

Early marriage rate is found higher in PWDs (5.3% vs 2.1%) in Nepal, and they also have very low capacity to make informed decisions for their sexual and reproductive health issues. In Bolivia and Albania, PWDs constantly suffer from domestic and non-domestic violence at a higher rate than non PWDs. Their participation in vocational training is comparatively low than non PWDs. Their decision-making capacities over health, education, training and employment in general is low compared to non PWDs in all countries.

Gender transformative: In all countries, the tendency of early marriage before age 18 has been decreasing although the tradition still exists among rural population, and girls' marriage takes place much earlier than boys. AYs and their parents understand the consequences of early marriage and pregnancy and opt for marriage at higher age (mean 23). Sexual violence is identified as one of the causes of teenage pregnancy in Bolivia and Albania.

COVID 19: COVID 19 pandemic affected all countries equally. Limited access to education for children and adults, unavailability of public health services, isolation, loss of livelihoods and family members, child labour, and disruption in mental health wellbeing were the main consequences felt by AYs in all countries. AYs with poor economic background and PWDs were the ones hit hard by the pandemic as they could not access to internet and laptops for on-line learning. Due to loss of family members and income, some PWDs reported to stop learning and started to work as child labour. More than 30% of AYs in Albania and Bolivia reported to have disrupted mental wellbeing during the pandemic period.

Water, Sanitation and Hygiene in schools: The findings from the study from all countries suggest that the government owned schools have been increasingly developing facilities for single sex toilets, sperate for boys and girls, and usable with improved facilities. However, AYs report that they are in general poorly managed. Access to basic drinking water in schools is also improving in Uganda, Nepal and Albania (67% AYs report so Albania) but AYs complain of inadequacy and poor quality of water to meet the demands of the students. AYs of some of the school report that they don't drink water available in schools. NGOs are also found supporting the schools to improve the access and quality of water in some areas in Uganda, Nepal and Albania.

Menstrual hygiene is considered as a social taboo in all countries and a barrier for girls to effectively participate in schools and social functions. Many female AYs complained that they cannot get information on this topic from schools and whatever information they receive traditionally from their mothers and sisters are not adequate. The issue remains a challenge in schools too in all countries. In Uganda, female AYs face the challenge of changing rooms, harassment by boys in Albania, and a general lack of support in the provision of sanitary pads and counselling in all countries.

Climate change: In all program implementing countries, AYs have acquired some form of knowledge about climate change from schools but community people are less aware. AYs state the consequences of climate change they are experiencing in their countries such as growing problem of water contamination, mining, and industrial pollution (Bolivia), less agriculture production due to unbalanced monsoon (Nepal and Uganda), and environmental pollution (Albania), and AYs express their concerns about the issue. However, in response to the climate change, very little or no actions are being undertaken according to findings in all program implementing countries.

AYs' participation in social networks and groups: Youth participation rate on social networks overall for all countries stood at 16.9%, Uganda being the highest of all (22.4%). However, the quality and activeness of the groups are not assessed. AYs are found to have been participating in different types of networks and groups depending on the country and the context and in general they are youth groups, NGOs, WASH groups, sport groups, disability groups etc. AYs are found less aware of the youth activities of government wings and municipalities in their areas in all countries. One-line meetings are not the common modes of meeting for majority of the networks, except for few.

AYs face both individual (lack of self-confidence, poverty, lack of knowledge, pregnancy etc.) and societal barriers (voices not heard, violence, prejudice against girls, sexual abuse etc.) to effectively participate in the social groups and networks.

Age-specificity: This topic explored about the future paths of AYs between education and employment. The findings came up with mixed reactions as 57% of AYs preferred to complete education first and then employment while about 43% (Bolivia and Nepal) would prefer employment over study. Preference for vocational training is found both in Albania and Nepal but AYs are also aware of not ending up with the wrong type of training that does not have any market value.

Findings on indicators

Goal level- Improve AYs wellbeing:

- Only 3.7% of women (aged 12 to 24) are found married before the age of 15. Early marriage tendency is decreasing in all program countries, although the tradition still exists in many parts.
- Among the sampled population, 27.6% of AYs are currently neither in education, training or employment. The situation of Uganda is alarming (53.2%) compared to other countries.
- Overall, the completion rate of primary education of AYs stood at 42.1%, secondary 36.3% and upper secondary at 16.3%. The education completion rate, however, was affected by how the respondents were chosen age-wise in each country.

Outcome 1: Improve AY choices towards teenage pregnancy and early marriage/Reduce incidents of violence among AYs:

- 28.7% of AYs are found capable of making informed decision about sexual relations, contraceptive use and health care in all countries, with highest proportion in Nepal (54.4%) and the lowest in Bolivia (4%).
- 23% of AYs in Bolivia and Albania experienced either social, emotional or physical violence in the past 12 months, and the share of PWDs was the highest (32%) among all groups.
- More than 95% of parents and community members showed full support for their children's intention to delay marriage and pregnancy (Nepal and Uganda)
- AYs overall indicated 23 as the appropriate age to get married, highest being in Bolivia (28)

Outcome 2: Improve gender transformative and inclusive educational pathways for AYs.

- In Nepal and Uganda, 87% of parents showed positive attitude and support towards their children participation in education, with slight difference between males and females (by 4% higher to males)
- 9.7% of parents of AYs took financial support to allow their children to participate in the formal education (Nepal only)
- In Uganda, 44% of children could not enrol back to schools after the lockdown of COVID 19, due to lack of appropriate support.

Outcome 3: Increase decent employment and protection from harmful works

- In all four countries, overall, 24.2% AYs were employed including apprenticeship and training and the share of PWDs is the lowest in this respect (13.7%).
- Out of those who were employed and then had a signed contract, only about half of the AYs (47%) had decent jobs that earned minimum wage and some social security benefits in addition to the signed contract.
- Out of those who were employed, 44% of AYs were earning equal to or higher than minimum wage and the share of PWDs was the lowest among all groups (26%)

Outcome 4: Improve policies, frameworks, strategies, systems, and networks with and for AYs.

- 41.5% of AYs were satisfied with the various types of services of municipalities and other government branches working in their municipalities (Nepal and Bolivia only) - Nepal's AYs being the highest (61%) and Bolivia the lowest (18.2%).
- 59% of AYs showed the will to lead changes in their communities if opportunities were given and the PWDs were not the less in this respect (60%).

Recommendations

- Support schools to promote awareness and information including necessary material supports (as needed) on menstrual hygiene focusing on both male and female AYs. Male AYs need to be included to reduce harassment incidents and to increase support to female AYs at menstruation moments if takes place in schools or at home environment (cross-cutting)
- Support Uganda program with more efforts and funds (if possible) to re-enrol children who were left out of schools after COVID 19. Conduct re-enrolment campaign if necessary.

- Put more efforts in Bolivia and Albania to increase awareness on negative effects of domestic and school level violence. Work with concerned government bodies to reduce violence and to encourage reporting incidents of violence.
- Work towards promoting awareness on climate change issues among AYs and at community level. A lot of AYs are not aware of this issue and no reports mention about any activity being implemented at school and community level to tackle this issue. Local knowledge may be used and promoted to address negative effects of climate change (cross-cutting).
- Work with schools to enable developing disabled -friendly environment with support on awareness raising and some low-cost infrastructure development to facilitate PWDs' easy movement and classroom learning environment (cross-cutting).
- Conduct training and awareness raising activities for PWDs and general AYs that enhances their self-confidence and decision-making capacities to lead their life (cross cutting).
- Provide vocational trainings to the AYs with good market assessment only. Increase their awareness on issues such as minimum wage, decent working conditions and their rights as an employee. Focus on trainings that are suitable for PWDs for future employment or self-employment (cross-cutting).
- Promote advocacy works and work along with the concerned government bodies to develop youth friendly programs. It seems that local governments do have such programmes (Albania, Nepal) but AYs are not aware of them.
- Focus on training and skill development on agriculture-based self-employment for AYs (Uganda and Nepal). Focus on those AYs who are neither in education nor in employment and training.
- Promote literacy and numeracy skills of AYs in Bolivia, focus on PWDs, and also explore the conditions in other countries.

Introduction and Project Background

Pathways to Wellbeing, Empowerment and Resilience for Adolescents and Youth (POWER 4 AY) is a five-year program funded by Bulgari and led by Save the Children Italy which is being implemented by SCI country offices in Albania, Bolivia, Nepal and Uganda between October 2021 and September 2026¹. This new initiative follows from the earlier Youth Empowerment Programme (YEB) which was also a five-year initiative funded by Bulgari and implemented in the same four countries between 2016 and 2021. The YEB was the focus of a strategic initiative conducted during 2019-2021, on which SC Italy conducted extensive learning activities and co-led the release of the [Adolescent Wellbeing Framework](#), which culminated in the development of a new approach incorporated in POWER 4 AY.

POWER 4 AY is guided by five principles from the Adolescent Wellbeing Framework. These are (1) human rights fulfilment which is at the core of all adolescent focused support; (2) the rights of adolescent participation to inform programming and policy; (3) program and policy are tailored to the unique needs of adolescents according to gender, age and abilities/disabilities; (4) transformation of gender and improvement of social justice through adolescents; and (5) change for adolescents is catalysed at all levels of the socio-ecological model starting from themselves, their families, communities, services, systems and policies. Guided by these principles each participating country developed a new program, which will be improving the wellbeing of adolescents and youth by measures of protection, healthier life, education and learning, decent employment, and improvement in policies, systems, and services.

The POWER 4 AY approach is designed with interventions that empower adolescents and youths (AYs) to face new challenges across the entire continuum of the socio-ecological model starting from (1) adolescent's knowledge, skills, beliefs, motivation and protective assets to (2) peers, parents, family, community attitudes, skills, behaviours, and norms to (3) availability of, access to, quality and responsiveness of infrastructure, systems and services, to (4) policies, budgetary and legal environment. The goal and the four key outcomes necessary to operationalize this holistic approach is transcribed into the Theory of Change of POWER 4 AY which is presented below.¹

GOAL: Improve all AYs wellbeing

Outcome 1: Improve AY choices towards teenage pregnancy and early marriage/prevent violence against AYs

Outcome 2: Promote gender transformative and inclusive educational pathways for AYs

Outcome 3: Increase decent employment opportunities and protection from harmful works

Outcome 4: Improve policies, systems, services and networks with and for AYs.

The baseline study is carried out in all four countries between June and July 2022 with the aim of providing a basis for answering research questions and establishing baseline values for the indicators pre-set by the

¹ For more information about the POWER 4 AY approach, please see this brochure.

program. In alignment with the program principles, the focus of the baseline study in all counties has been the adolescents between age 12-24, persons with disabilities, teenage girls and boys, parents and stakeholders. The country specific baseline report presents facts in detail about the knowledge, behaviours, situation, aspiration and motivation of adolescents' boys and girls. This synthesis report is a summary of four country reports mainly focusing on key cross cutting research questions and indicators.

2 Purpose of the study

The primary purpose of the study is to establish an evidence-based document that informs of the status of the socio-ecological model on the basis of research questions, goal and outcome level indicators embedded in the POWER 4AYs theory of change.

The specific purpose as outlined in the common ToR are as follows.

1. *Establish foundational evidence for answering the research questions*
2. *Establish values for the indicators of the logframe at the goal and outcome levels for assigning or revising targets for indicator performance*
3. *Provide index and targets for indicators for forecasting indicator performance against their planned targets to aide effective management of the project*
4. *Provide an analysis of the moderator variables across the continuum of socio-ecological model that either catalyse or contain positive change for the wellbeing of AYs*
5. *Provide the baseline data for comparative analysis of the mid-term and final summative evaluation at project completion*

3 Methodology of the study

3.1 Study design

In all four countries, the study was designed to support programs for answering the research questions and establishing baseline values for the country specific and common indicators. The outcome level indicators as indexed in the Theory of Change document and selected for the baseline were chosen by the countries from the pool of indicators indexed in the POWER 4 AYs Common MEAL PIRS (Performance Indicator Reference Sheet). In alignment with the Global MEAL PIRS, the program implementing countries have also developed their own MEAL PIRS and logical frameworks which specify the type of indicators they will monitor over the duration of the program. This synthesis work is done identifying those indicators that are marked for aggregation and as core indicators in Common MEAL PIRS, and where at least two countries have furnished data on the given indicator, except for few where only one country was responsible to monitor the indicator.

In all countries, the baseline study was done as a cross-sectional study with the prior knowledge of target areas but before selecting the AYs who will participate in the program. Such cross – sectional study will help generalize the situation of the AYs in the target areas and adjust program activities according to the needs of specific geographic areas. The study used a mixed method of data collection-both quantitative

and qualitative- and the results from the countries show that the quantitative methods were helpful to obtain baseline values for the indicators and to understand some generic situation of the AYs with respect to their health, education and employment, while qualitative data proved useful to answer the cross-cutting research questions.

3.2 Research questions and indicators

The POWER4AYs program developed a common ToR that outlined the main research topics and their questions (Annex 2), while each country also developed their own specific ToR according to the nature of their program and activities. The research topics were similar in all cases, and all countries adapted them according to their context. The quantitative questionnaires for AYs were administered for the age group of 12 to 24 years old AYs in all countries with differences in questionnaire structure according to the types of indicators and research questions by country. The parent questionnaire, however, took the form of both quantitative and qualitative according to the needs and the context of the country. All country offices also designed and administered qualitative tools such as FGD and KII which were primarily directed towards collecting data on cross cutting research questions, in addition to information on research topics that were planned to collect from quantitative tools as well. Quantitative tool- the AY questionnaire- was, however, the primary tool that was designed to collect baseline values for most of the indicators of POWER 4 AYs program.

The synthesis report has captured similar types of information from all countries and where dissimilarities were found, they are tagged with the countries' names. In the case of indicators, the synthesis work has aggregated core indicators and those marked for aggregation in the common MEAL PIRS in all cases where data for at least two countries were available. A list of indicators with their baseline values is given in the Annex 1.

3.3 Sample size and the types of tools used in the study

Table No. 1 below presents sample size data by country and total used in this study. All countries used quantitative questionnaire related to AYs aged 12-24 years; parent and community member questionnaire was administered in all countries except Albania and all countries implemented qualitative tools- focus group discussion and key informant interviews.²

Table 1: Sample size by country

<i>Countries</i>	<i>Quantitative</i>		<i>Qualitative</i>		Target Groups AYs	Adults
	AY	Parent	FGD	KII		
<i>Nepal</i>	904	293	23	26	9024	1732

<i>Uganda</i>	804	90	15	14	4500	1500
<i>Bolivia</i>	754	114	13	0	5000	1500 (Parents)
<i>Albania³</i>	989	0	18	10	1797	851
<i>Total</i>	3451	497	69	50	20321	5571

Sample sizes were calculated using universally recognised sampling formula at 95% confidence level with 5% margin of errors. At data collection level, random selection methods were used by the countries to select respondents out of the communities or schools. Respondent groups for qualitative study were selected on the basis of purposive sampling and they included groups such as people with disability, parents and community members, male and female adolescents' groups, teachers, health and youth council program officials, municipality officials and so on.

3.4 Data collection and analysis

Data from the field were collected in between April and June 2022 as each country office had their different timeline. All countries used mobile data collection technologies such as ODK/KOBO/Google software which enabled live data entry into the system as soon as interviews were conducted. For data analysis, SPSS and STATA were used by the countries. Data were collected and analysed by independent consulting companies in all countries and in one case by Bolivia SCI staff.

The consultant used excel sheet to aggregate data related to indicators and other relevant data for four countries. The aggregations were done following total number of observations (N value) and specific variable observation (n value) for a given indicator data, so that accurate aggregated statistical percentage could be derived for four countries. Specific country reports were the primary sources for collecting and aggregating data for this synthesis report.

3.5 Limitations

1. Methodological differences in calculation are noticed in one or two indicators. In such cases, the synthesis consultant has either recalculated the data from SPSS himself, where available, using similar methods or has presented data separately for the country in question showing the differences, where it was not possible to re-calculate.
2. There was a lack of general standards in some country in case of few indicators related to employment. For example, Uganda could not calculate the baseline value for one indicator as the country has not fixed any standard for minimum wage.

³ Data for Albania missing

4 Presentation of Findings

4.1 Demographic characteristics of the respondents

The table No.1 below presents key socio-demographic data of the respondents of the POWER 4 AYS program implementing countries. By age group, highest population of very young adolescent (VYAs 12-14 years old) are sampled in case of Uganda and Bolivia (28% to 30%), while Bolivia represents very low population of 20-24 years old sample population of adolescent (3.8%). An almost balanced gender representation of the sampled population is noticed in all countries except Albania where female representation is comparatively higher than other countries (59.5%). Based on two countries' data (Nepal and Albania), more than 92% of the adolescent population reside in their private houses, and more than 78% of them are single.

(Education and disability related findings are described in detail in other sections below)

Table 2: Socio-demographic characteristics of respondents

		<i>Nepal</i>	<i>Uganda</i>	<i>Bolivia</i>	<i>Albania</i>
<i>Age group</i>	12-14 years old	19%	28%	32%	21%
	15-19 years old	52%			41%
	20-24 years old	29%			38%
	15-24 years old		72%	68%	
<i>Gender</i>	Male	45%	51%	50%	41%
	Female	55%	49%	50%	60%
<i>Person with disability</i>		4.4%	12%	12%	12%
<i>Type of households</i>	Private	92%			98%
	Collective				2%
	Rental/relative house	8%			
<i>Residence</i>	Urban				65%
	Rural				35%
<i>Marital status</i>	Married/Cohabiting	16%	6%	0.3%	
	Single	84%	79%	97%	
	Other (divorced/widow)	0%	16%	2.7%	
<i>Total (N)</i>		904	804	754	989

Basic services characteristics⁴

In case of **Nepal**, for 81% of the adolescent households, the access of food is buying from store, while 63% (from within 81%) also grow rice and vegetables in their farms. 65% of the adolescents take 3 meals per

⁴ The types and nature of data provided by the countries are different from one another under this heading. Therefore, only narratives are provided as per individual countries.

day. 82% of them have access to electricity while 44% have access to piped water system inside or within their houses. With regards to basic amenities at home, 44% have access to television while 38.8% only have access to internet services. Alcohol consumption among the population is a growing problem in Nepal and in the sampled study, 9% of AYs reported to consume alcohol, while the reported cases of use of substances such as tranquilizers, cocaine is very low (0.1%).

In **Albania**, 38% of the AYs households cannot afford a meal with meat, chicken and fish every second day and 45% of households cannot afford unexpected expenses that costs more than 30,000 ALL. Likewise, 46% of AYs households cannot afford to go on week holidays on their own expenses. More households of female AYs (59%) are part of households that cannot afford at least one of the above items. 41% of these households meet their basic needs such as meeting needs of foods, housing and medical care with great difficulty and this difficulty is much more pronounced in the rural areas (49%) of Albania.

In case of **Uganda and Bolivia**, such data are not available except for above presented (Table No.2) socio-demographic data.

4.2 Disability status of the AY population

(RQ 1.1 to 1.45-prevalence, types and differences)

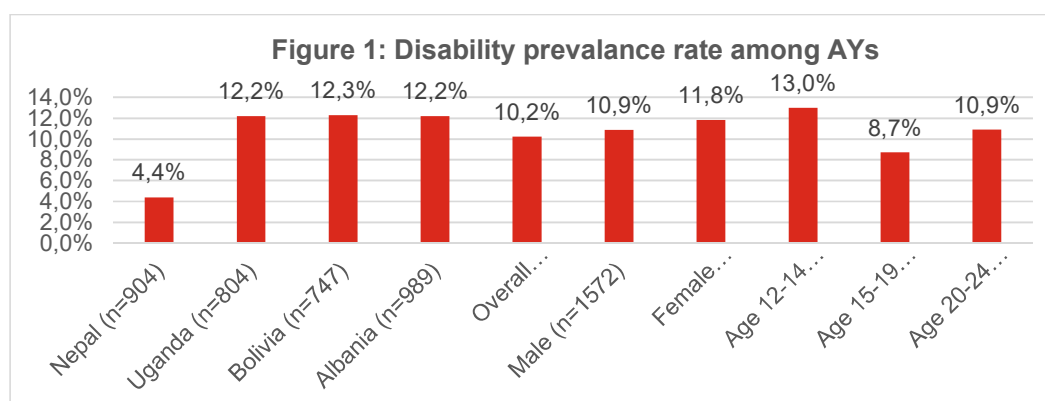
Disability prevalence rate

In all four countries, assessments of disability prevalence rate among adolescents aged between 12 to 24 were done following Washington Group short version questions on disability. A set of six questions on the day-to-day functioning of a person are prescribed under the WG Questions after field test in several countries. The questions ask respondents to identify level of difficulty under a scale of four answers; “No difficulty”, “A little difficulty”, “A lot of difficulty” and “Cannot do at all”. The children with disabilities are considered those who have at least one level of difficulty within the category of “A lot of difficulty” and “Cannot do at all” according to the WG prescribed method of analysis, however, projects may include “little difficulty also” depending on the context and need.

Overall, 10.2% AYs are found with disabilities in four countries, the lowest being in Nepal⁶. All other remaining countries’ prevalence rate stood at about 12%. There is not much gender wise differences in the disability prevalence rates, while disability prevalence rate is lowest among AYs of the age group 15 to 19 years compared other age groups and gender.

⁵ Refer to Annex 2 to for details on research questions set in the common TOR.

⁶ Nepal included persons with “little difficulty” also in the calculation of PWDs which gave a figure of 21.7%. This figure is used throughout the report of Nepal and in disaggregating data for all indicators. For the sake of uniformity among all countries, Nepal’s disability rate is recounted including only WG prescribed variables which stood at 4.4%. In all other data related to indicators in this report, the N value of 21.7% is used.



Types of disabilities

The six types of disabilities as shown in the table below are the ones adapted from the Washington Group short version of questionnaire to determine the types of disabilities among population. Among all types, comparatively highest proportion of AYs suffer from difficulty in remembering and concentrating (3.9%), followed by difficulty in seeing (3.2%). The country specific scenarios, however, slightly differ as shown in the table below, for example, in Bolivia higher proportion of AYs suffer from difficulty in walking and climbing, while in Uganda, they suffer from difficulty in seeing.

Table 3: Types of disabilities among the AYs population

	Difficulty seeing	Difficulty hearing	Difficulty in walking and climbing	Difficulty in remembering and concentrating	Difficulty in self care	Difficulty in communicating	N
Overall	3.2%	1.7%	2.9%	3.9%	3.1%	2.5%	3416
<i>Nepal</i>	2.8%	0.2%	4.6%	7.3%	2.4%	3.4%	904
<i>Uganda</i>	5.1%	4.5%	2.7%	1.9%	0.9%	1.7%	804
<i>Bolivia</i>	2.5%	0.8%	6.1%	1.5%	5.3%	2.5%	719
<i>Albania</i>	2.6%	1.4%	3.5%	4.2%	3.9%	2.4%	989
<i>Male</i>	1.5%	1.6%	2.2%	3.4%	1.4%	1.2%	1175
<i>Female</i>	4.6%	1.7%	4.0%	3.9%	2.6%	3.2%	1271

FT⁷

Differences between AYs with and without disabilities

⁷ Albania did not disaggregate data by gender

The **Nepal** report explored some aspects of differences between persons with disabilities and non-disabilities with respect to availability of jobs, future plans, and employment. 45% of PWDs have got government jobs compared to 17% of persons without disability. This situation may have resulted due to the reserves employment quotas by the government for PWDs. However, the overall employment rate is slightly higher in case of Non PWDs (8%) compared to PWDs (6%). The survey also asked if PWDs had any kind of future plans and found that 72% of PWDs had some kind of future plans or know what they were going to do in the future, which is slightly lower than Non PWD (78%). The qualitative findings indicate that AYs with disabilities are not able to exercise their rights to fully participate in the society compared to other non PWDs AYs. Access to education, health facilities and other government services is comparatively lower than other AYs. According to the participants of the FGDs, the government is working towards the upliftment of PWDs and now almost all people with disabilities are provided with identification card and also get disability allowances. The schoolteachers are found very positive towards empowering persons with disabilities, although they reported that they lacked sufficient funds to make the classrooms and schools disable-friendly. One of the teachers in KII stated that *“extra classes are running in his school for the students who have difficulty in understanding and learning things. He added ‘if opportunity is given anyone can accomplish any things’”*

Early marriage before the age of 15-19 among sampled population with disabilities in Nepal is found higher (5.3%) against the overall AYs’ proportion of 2.4% and similarly 60% of persons with disabilities aged between 15-19 have given birth which is 30% higher than the overall proportion. However, a higher proportion of PWDs (78%) stated to have used SRH services compared to Non PWDs (69.3%).

In **Albania**, comparatively higher percentages of AYs with disabilities (41%) aged between 13 to 17 experienced either social, emotional, or physical violence at their households or schools than the general AY population (32%). Out of those who experienced violence, 9% of PWDs experienced all types of violence. The employment rate of PWDs including in training is 15% in Albania which is way lower than the overall rate of employment of the sampled AYs (32%). Access to training is also very limited to PWDs and according to VET education director in a FGD *“persons with disabilities are a priority for attending the courses, but the lack of the Center's facilities has sometimes become an obstacle for their accessibility in training courses, given that the Center is located on the second floor (lack of ramps and elevators). However, with the transfer of the Center to the premises of the Arben Broci school, facilities have been provided for the possibility of PWDs attending courses.”* 100% of PWDs in Albania work in private sector jobs and none of them fall under the category of having decent job. On the other hand, the participation level of PWDs in social networks and groups is equal to non PWDs although the overall participation level of AYs in Albania is low (17%). However, some KII data suggest that the participation level of PWDs in NGOs or social networks is very limited due to the inadequacy of appropriate infrastructure such as roads and sidewalks that can support them to attend events and activities.

In **Bolivia**, a higher proportion of AYs with disabilities reported to have experienced violence (20%) compared to non-disability AYs (15%). PwDs have experienced comparatively higher level of psychosocial and sexual violence rather than physical violence compared to the non-PWD AYs. Majority of these cases

took place either at home or at schools. With regard to future plans and aspirations, 62% of PWDs stated to have some kind of plans compared to 88% non-PWDs AYs. Likewise, PWDs are found less capable to make informed decision about seeking health care (28%) than the non-PWDs AYs (46%). Proportion of PWDs who have ever worked is 20% which is lower than non-PWDs (51%).

Likewise in Bolivia, PWDs are less capable than Non PWDs in making their own decision to seek reproductive and sexual health care services. 28% of PWDs compared to overall 46% of AYs are found capable to do so. In majority of the cases, “other” category of people who are not their relatives or partners decided where to seek services.

In **Uganda**, the situation of PWDs seems more or less similar in terms of employment and other factors with other AYs in Uganda. The proportion of PWDs who are in employment and training is only slightly lower (28%) than the overall proportion (30%). Many of them are involved in self-employment and a sizable proportion of PWDs (44%- out of those who are employed) have developed productive and decent IGAs, which is again higher than the overall proportion (32%) of AYs who did so. The participation level of PWDs in community groups and networks is also equally comparable with non-PWDs (20% vs 22%). However, PWDs are found comparatively less aware of the contraception use compared to other non PWDs (62% vs 72%) and female PWDs have less voices over the decision regarding contraceptive use. The overall capacity to make their own informed decision regarding health care, contraceptive use and sexual relation among AYs is comparatively lower in Uganda (20%) than other countries (refer to this indicator in the section below) and PWDs face the same situation. In one of the KII, a health facility in charge stated that *"Youths with disability are not visible in public, I think it is their parents making decisions for them and there is completely no support for persons with disabilities. In one of the visits to the community, we found a child left alone at home and neglected, there was no parental care and food component was missing. Those with mental illness are deserted completely"*. The qualitative data further suggest that Uganda has disability grant in each district, but the challenge is to access PWDs residing in remote locations and government officials often ignore to visit remote places.

4.3 Gender transformative

(RQ 2.1-incidents, reasons and causes for early marriage and pregnancy)

In **Uganda**, there are no reports of incidents of early marriage and pregnancy, moreover, parents of AYs (almost 100%) show high support if their children want to delay marriage or pregnancy and this is the case in Nepal too. These findings indicate that parents are increasingly aware nowadays of these issues and understand the disadvantage of early marriages and pregnancy.

Bolivia reports 110 cases of teenage pregnancies country-wide per day according to the government reports of which many of them are the results of sexual violence. The AY baseline survey report states that about 72% of girls between 12-17 years old had experienced sexual intercourse and out of which 26% of teenagers were pregnant at some point. The finding shows the severity of teenage pregnancy in Bolivia

and the need to address the situation through appropriate awareness raising and enactment of laws that prohibits any form of sexual violence.

The rate of early teenage marriage before age 15 is low in **Albania**. However, the survey found 13% of AYs who married before the age of 18. The mean age of marriage for male is 20 and for female is 18 in the sampled population while the government studies report 3.4 years age gap between males and females. Although the teenage marriage tendency has decreased over the time, there is still a huge gap with a high dominance of girls being married earlier compared to boys. According FGDs respondents, being married earlier is normal here to have a child as soon as possible but comes with consequences as the girls are too young and are unable to properly take care of household works along with the baby care.

Early marriage cases before the age of 15 in the sampled population stands at 2.4% in **Nepal**, although in the age group of 15 to 19 years AYs, 4.1% of AYs were found married and out of which 30% had ever given birth. In Nepal, the legal age of marriage is now endorsed at 20 by law and marriage and pregnancy below 20 will obviously be considered below the age enacted by the law.

The main causes of teenage pregnancies are stated as lack of information for VYAs, lack of self-esteem and decision-making capacity of teenagers, alcohol consumption and sexual violence according to KII and FGD results. In all countries, majority of the AYs consider increase in infant mortality, risk of anaemia, abortion, school drop-out, neglect from the family and health risk as the major consequences of early pregnancy.

4.4 COVID 19

(RQ 3.1 and 3.2- impact of COVID 19 on schools and daily life, and on child labour)

The emergence of COVID 19 pandemic affected all countries equally with unprecedented challenges in public health and led to a devastating economic and social disruption for nearly two years. Limited access to education, unavailability of public health services other than patients of COVID 19 in the peak period of pandemic, isolation, economic and livelihood loss of people, loss of family members and disruption on mental health well-being were the common experiences felt by the AYs of all countries.

In all countries, the participants of the FGDs and KII reported that pandemic seriously affected their educational attainment as schools remained closed without preparation for any other alternative methods of teaching and learning. Schools after some time started to introduce on-line classes but internet and laptops facilities were limited and accessible to only few rich students. AYs from remote geographical areas in all countries were hit hard as they did not own any technological means for alternative learning. According to a teacher from Nepal in a KII, *“the quality of education decreased due to the school closure, and we are still trying to combat that”*. Many AYs in the program countries stopped studying having inadequate support for on-line classes.

The pandemic created a negative effect on family incomes in all program countries. Many AYs in Bolivia and Albania reported to have lost their jobs. The situation was further compounded with the fact that in many cases AYs lost their family members who were the bread earners. In one case from FGD, one boy

from Albania with disability stated that *“The pandemic also brought damage to people's lives. The only person I had in this world, my mother, was taken from me and now I am left alone. The pandemic isolated everyone and brought many consequences in every direction. I was very afraid and did not leave home for a moment”*. During pandemic and even after that, many AYs could not join schools due to financial problems. A 17-year-old boy from Nepal during KII stated that he is now working as a bus conductor. He said *“my family does not have any source of income and my parents cannot even pay my school fee so that I had to leave studying and start earning”*. In all countries, the pandemic brought negative effects on the family income and left many AYs vulnerable that resulted in drug use, dropped out from schools, and increased incidents of early teenage pregnancy.

Albania and Bolivia report the impacts of COVID 19 on the mental wellbeing of AYs. 32% of AYs in Albania and Bolivia reported that their mental wellbeing was negatively affected by the COVID 19 and the persons with disabilities among them were the most hit hard (64%). A mother in one FGD from Albania stated that *“At the beginning of the pandemic, I was a young and unemployed mother returned from abroad. I lost sense of time during that period and experienced it very badly. Since contact with people was not allowed, I remained very isolated and felt the lack of care from other people who usually help me, especially since I was with a small baby in difficult health conditions”*. Loss of income, loss of loved ones and mandatory stay in isolation contributed to stressed mental wellbeing of the AYs.

On the other hand, the pandemic also opened venues to be more creative and learn new skills that the AYs did not have before. Some AYs in Bolivia reported that they learned how to cook, some learned new technologies such as how to use internet and laptops for virtual classes (including other countries) which they had never touched before, and some felt that their family was more united than before due to COVID 19. During pandemic in Nepal, some teachers introduced new ways for AYs for “studying and earning side by side” where students were provided skill development training on poultry farming, kitchen gardening, weaving and stitching.

Bolivia and Nepal report that daily work life of AYs was severely affected due to pandemic. More than 85% of AYs helped in domestic works and those who lost their income and earning member stopped their studies and started to work.

4.5 Water, sanitation and hygiene

(WASH- RQ 4.1 to 4.3- schools’ wash and hygiene conditions and practices, menstrual health/SRH services and AYs satisfactions)

The baseline surveys conducted in four countries explored the physical conditions and practices regarding water and sanitation facilities at schools and the general menstrual health conditions particularly affecting the girls. Some countries presented only quantitative data in this regard, while others also qualitative.

School WASH conditions

According to the findings in Albania and Nepal, nowadays majority of the government owned schools have single sex toilets, separate for girls and boys. However, they are poorly managed in case of Nepal, while

in Albania a significant portion of AYs (80%) reported that the toilets are basic with improved facilities, single sex and usable at the schools. The government owned general schools are comparatively poorly managed in terms of sanitation than technical schools in the case of Albania. Some teachers in Nepal and Albania reported that they are working with some NGOs in promoting sanitation conditions, menstrual hygiene, hand washing and junk food free schools.

Access to basic drinking water has improved in countries like Uganda, Albania and Nepal compared to the past (No data for Bolivia, which will be collected through a separate process) but they are still not adequate and are not properly functioning to meet the demands of the students. For example, basic drinking water from improved sources is available in 67% cases in Albania while the rest also have improved sources but there is either intermittent availability of water or no water at all. The quality of water is also reported to be not satisfactory as a girl student from Albania puts it *"There is water at school, but we never drink it, I believe that it should not be drunk considering the fact that the taps are rusty. We never have toilet paper or soap, so we can only go to the bathroom on rare occasions"*. Only Nepal has reported whether schools had disability friendly WASH infrastructures and during FGD and KII, the survey found few schools that had disability friendly toilets, hand washing stations and classroom arrangements. But many of the schools lacked these facilities due to inadequacy of budgets and other program implementing countries may also be facing the similar situation. One of the teachers at a school in Nepal mentioned that *"We lack enough budget to make our school disability friendly; however, we are using local resources to construct disable-friendly structures at our school"*.

Menstrual hygiene

According to qualitative findings, the issue of menstrual hygiene is a societal taboo in all program implementing countries and a barrier for girls to effectively participate in schools and social functions. The sources of information for teenage girls about menstruation hygiene in all countries except their mothers or sisters are rare as these topics are not openly discussed at schools, and in families and communities. In Nepal, it is reported that the schools have incorporated SRH topics from the early grades, and health posts in municipalities include these services, however, one of the health officials mentions that *"AYs have access to SRH services, but usually they don't prefer to utilize those services."* He further added: *"women and girls are very shy to talk about sexual and reproductive health issues"*. In Bolivia, about 50% of female AYs think that the information they receive from schools and other sources on this issue is not adequate and majority of them (70%) rely either on their mothers and or internet if they need any further information. 22% of the Bolivian male AYs think that menstruation is only women issue, which shows that there is a general lack of awareness and information about this issue in both male and female AYs. In Albania, it is also a taboo to talk about this topic and adolescents expressed that they receive such information by chance in the class or by their older sisters. A 15-year-old girl from Albania puts this as *"Since I live in a village, such topics are taboo. The biology teacher can discuss topics such as menstrual hygiene or SRH, but this can be done if she realizes that something is wrong with one of the girls in the class. We do not have accurate information, there is nothing in the school to facilitate us in this direction."*

Unfortunately, the same thing happens in the family as well. We are always afraid during that phase (menstruation) that we will be embarrassed".

Menstruation hygiene management at schools has remained a challenge in all program implementing countries. In Uganda, female students face the challenge of changing rooms if the menstruation takes place in schools. According to a district level KII participant *"Only few schools have changing rooms and availability of pad (given by some NGOs) but they are not sufficient. The girls cannot afford to buy sanitary pads constantly every month"*. In some schools in Nepal, qualitative findings indicate that there are sanitary pads available for girls nowadays and girls are provided with iron and folic acids tablets and all students receive de-worming tablets. This is one of the AY friendly moves of the schools. In Albania, girl students face harassment by boys at schools as one of the girls mentions that *"I think that the only problem with menstruation process is regarding boys' harassment at school. I remember a situation from the primary school, when the girls got dirty during those days, a normal thing that happens to all of us, and the boys bullied them, insulted them. While in foreign countries, boys have completely different behaviour, they try to help girls, they will give her their shirts to cover"*. In all countries, there is a general lack of awareness and appropriate hygiene facilities and information for AYS, which the Power 4 AY program may address in the future.

In general, AYS are not found fully satisfied with the WASH services at schools, although the qualitative findings suggest that the condition is improving than in the past.

4.6 Climate change

(RQ 5.1 to 5.2 – Knowledge, awareness and present activities of AYS)

Climate change is a global concern and no country in the world is left untouched by its effects. Rising temperatures due to deforestations, mining, and industrial pollutions are the common causes and all the program implementing countries are facing the consequences in some or other ways.

In all countries, the AYS have acquired some forms of knowledge on the topic of climate change mainly from schools but community people in general are found little aware. One of the students from Albania relates that *"Climate change is related with the addition of carbon dioxide, where oxygen is reduced creating environmental pollution. Also, the change in temperatures brings the melting of glaciers and the destruction of many habitats."* In Nepal and Albania, the qualitative findings suggest that although AYS are receiving information about climate change from schools, AYS living in the remote areas are less informed. In Bolivia, AYS are concerned and aware of the growing problems of the water contamination, air pollution and accumulation of solid waste but at the same time more than 55% of AYS do not have any knowledge on this topic and very few stated that one of the mitigation measures is the use of renewable energy. Mining and industrial pollutions are stated as the main causes of climate change in Bolivia. Nepal and Uganda report effects of climate change on agriculture productions which is the major occupation of the community people in the rural areas. During KII and FGDs one of the AY participants of Nepal mentioned about it *"This year climate change hugely affected our community. Due to the heavy rain, crop did not*

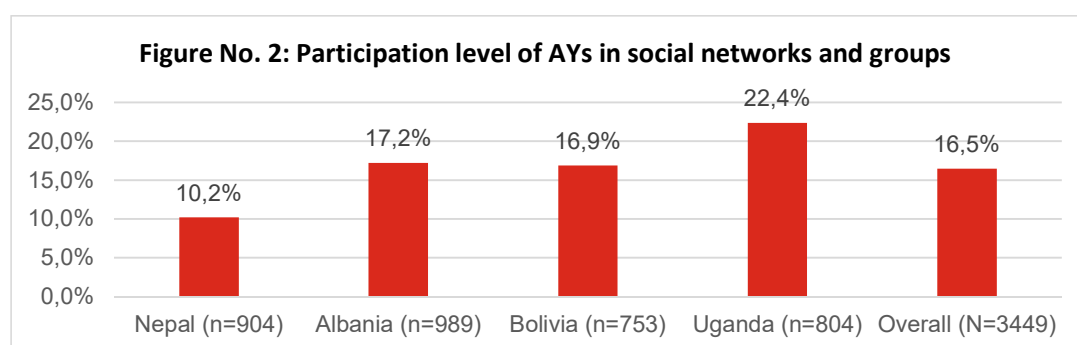
grow well. The disease called 'Sindure' affected the wheat. Either it's a heavy rain or drought, that frequently hampers the crops that are ready to harvest which is miserable to the farmers who spent their blood and sweat each day in the field'.

In response to the climate change, countries do not report any actions being taken at the community level. At school level, few schools in Nepal reported to have been conducting awareness classes and workshops about the climate change and plantation programs each year. One of the schools' Principal stated that *"we conduct plantation program each year by ensuring the active involvement/participation of the students and teachers. In addition, we also highlight the issues of climate change and its possible consequences in different school programs like essay writing, public speaking, etc.* Similar action was taken in Albania too where one of the AYs in FGD stated that *"An initiative was taken for the Climate change issue, where some trees were planted within the high school of the city".* However, these activities are found in very small scale and limited to some schools only.

4.7 AYs' participation in social networks/groups

(RQ 6.1 to 6.5- participation and types of groups, barriers, support needed)

Participation of AYs on social groups and networks that support causes of youths and general community issues is important as they are the future leader of the societies. The participation level of AYs is low as overall only 16.5% of AYs are found engaged in various networks and community groups.



Types of groups AYs are involved and their modes of meetings

AYs are involved in different types of community groups and networks depending on the country and the context. For example, in Nepal AYs are mostly involved (91%) in community-based organisations generally called CBOs and few of them in youth groups (16%). In Albania, youth participation in NGOs is high (34%) followed by participation in community development groups. Students' centres are the preferred participation venues for the AYs of Bolivia while in Uganda village savings and credit associations (VSLA) have attracted the youths to become members. These participation shows that youths prefer to be the active member of the societies and contribute to the cause of common benefits. Youths continuously learn new things from such participation as a girl from Albania mentions that *"I attend a women's NGO. I took part in many activities that took place mainly in the squares, for domestic violence as well as various*

international days. I learned many new things, especially regarding my rights as a person with special needs". The country reports state that the governments also have youth wings or structures in the municipalities and they are nowadays making efforts to involve youths in various awareness raising and capacity development activities, however, very few youths are aware of or have access to it.

Table 4: Participation level of AYs in social networks and groups

	Nepal	Albania	Bolivia	Uganda
Youth group	16%			30%
Community development group	91%	28%	5%	2%
Environment group	0%	8%	2%	2%
Water and sanitation group	1%			1%
Sports group	2%		2%	25%
Financial cooperatives/VSLA	2%			87%
Agriculture related groups	1%			48%
NGO		34%		
Religious group		9%	11%	
Political group		12%		
Summer school		5%		
Advocacy group		5%		
Students' centers			37%	
Groups against violence			3.1	
Art group			2%	
Disability groups			0.80%	
Others			23.60%	9%

Multiple response sets

More than three quarters of AYs engaged in these groups state that their modes of meetings are mainly physical and less than 5% conduct online meetings only. However, the findings suggest that there is a growing tendency to use both modes of meeting depending on the situation such as lockdown and is still limited. Bolivia and Nepal country reports mention that about 39% of the AYs also hold positions in these groups but no information is available regarding what kind of positions they hold. In the meetings, AYs report that they discuss several issues and, in all countries, the main issues AYs discussed are general community issues, youths' issues, environment, children related issues, education, sports, leadership and participation, resources for business start-up and employment opportunities.

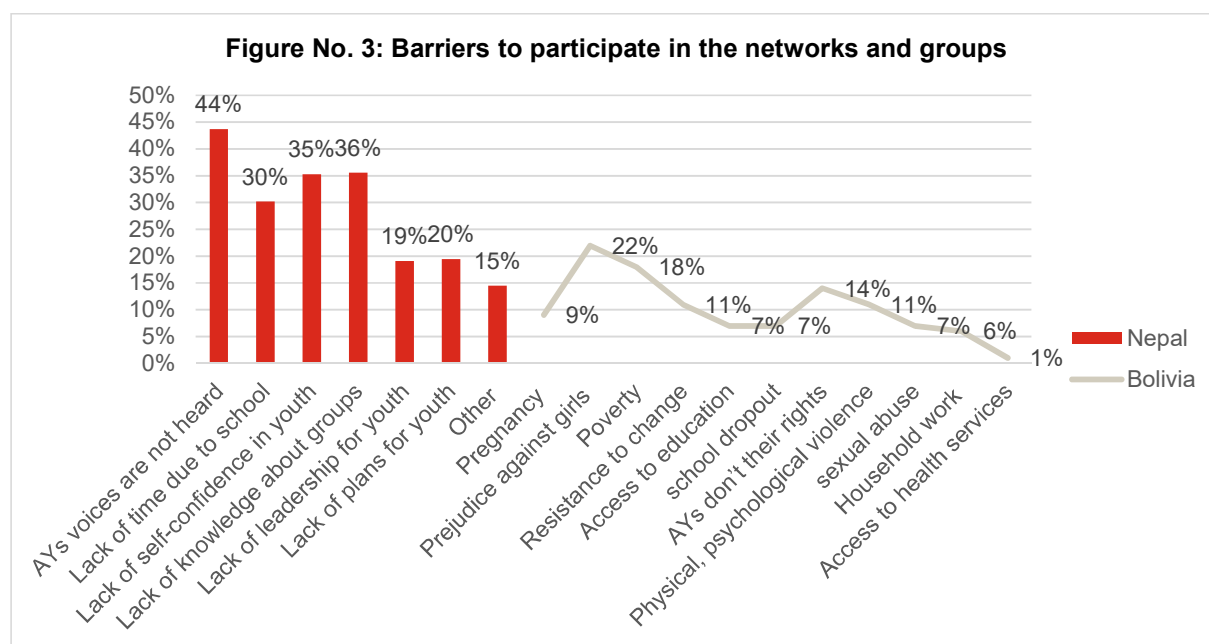
Barriers to participation and support needed

Data on barriers were collected by two countries only- Nepal and Bolivia. However, given the nature of barriers mentioned, they can be representatives to all countries. The barriers mentioned in the Figure below explain both individual and societal level barriers due to which AYs face difficulty to effectively participate in social groups and networks. According to the Figure below, the major barriers include 1) AYs

voices are not heard 2) lack of self confidence in AYs 3) No knowledge about the groups 4) pregnancy 5) prejudices against girls and women that they are not capable to participate 6) poverty 7) violence and lack of knowledge about the rights of AYs.

Overall, the participation level of AYs in social groups in all countries is low presenting opportunities for the program to work in these areas and help mitigate some of these barriers.

3Figure No. 3: Barriers to participate in the networks and groups



Multiple response set in case of Nepal

The survey also explored about what types of supports AYs needed to mitigate these barriers and as major supports AYs mentioned life skill development, education, employment, disability friendly education systems and that their views should be heard and respected.

4.8 Age-specificity

(RQ 7- future plan and preferred path between education and employment)

All adolescents have dreams about what they are going to become in the future or what course they will adopt to be a professional in their preferred fields. The baseline research asked questions around this topic and according to the findings, in Bolivia and Nepal, around 71% AYs would like to pursue their education, 55% employment and another 59% like to pursue technical vocational skill. There are 21% of AYs in Nepal who would like to do their own business in Nepal. More than 63% of AYs of all age groups would like to pursue education, while overall about 55% of AYs of all age groups would like to engage in employment. In Bolivia, the higher age group of AYs (20-24) are more interested in employment and education at the same time.

In Albania, many AYs would like to pursue professional vocational courses that can generate employment and regular income with a careful market research, and they opine that there is a lack of such professionals in big cities like Tirana. A 17-year-old boy states that:

“I think that young people need to receive orientation in the community for the opportunities offered to them for professional courses, employment opportunities, regular employment, etc. It is very important to properly orient ourselves according to the skills we really have, and not to take professional courses that really have no value because we do not have that kind of ability to do it the best as a job. I know many friends who have taken several professional courses but have not put into practice the acquired knowledge....”

Table 5: Future goals of AYs

	Education	Employment	Both (Education and employment (Bolivia Only)	Technical Skill Learning	Self-employment (Nepal only)
<i>Bolivia (n=693)</i>	94.4%	44.3%		79.70%	
<i>Nepal (n=688)</i>	49.0%	66.1%	70.9%	39.40%	21.40%
<i>Overall (N=1381)</i>	71.75%	55.17%		59.5%	
<i>Age (12-14)</i>	73.9%	57.3%	51.1%	57.7%	10.2%
<i>Age (15-19)</i>	75.0%	56.3%	75.0%	59.4%	17.5%
<i>Age (20-24)</i>	63.4%	53.1%	95.2%	53.5%	36.3%
<i>PWDs</i>	63.90%	58.05%	58.60%	38.8%	22.3%
<i>Male</i>	66.0%	57.3%	72.2%	55.1%	23.4%
<i>Female</i>	75.9%	53.8%	69.7%	62.9%	19.9%
Multiple Response sets					

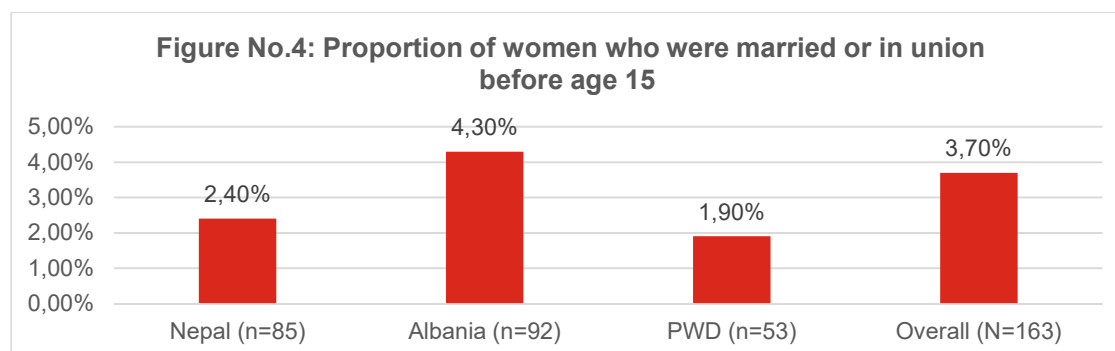
Some community leaders think that in general AYs do not receive proper orientation about their future directions in the schools. Such orientation should start from schools and students should learn, based on their interest, professional courses as soon as possible so that they can get a job and come out of poverty.

4.9 Findings on Indicators - Goal: Improve AYs wellbeing

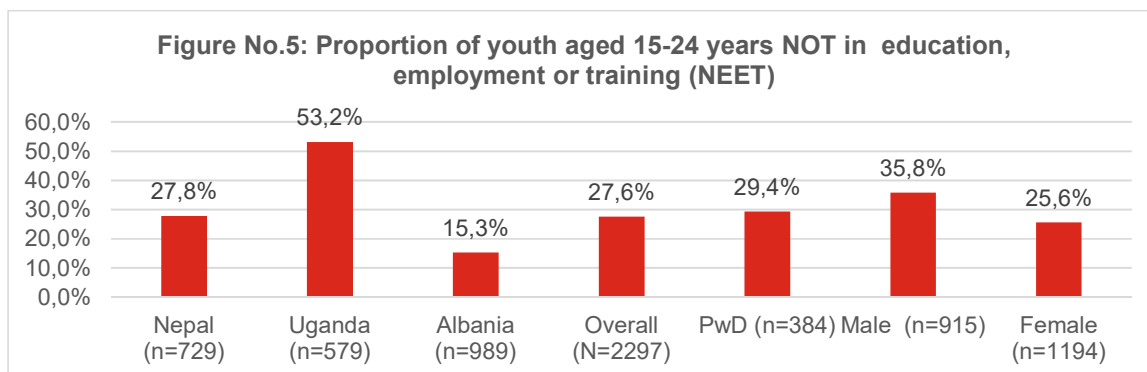
The synthesis report compiles and presents findings on the core indicators and those that were marked for aggregation for all four countries. It includes those indicators that are monitored by, and data are available for at least two countries, except for those cases where only one country was responsible to monitor the indicator.

Although it was not intended to monitor and provide findings at goal level indicators, the country reports included findings on three indicators at goal level which are presented below.

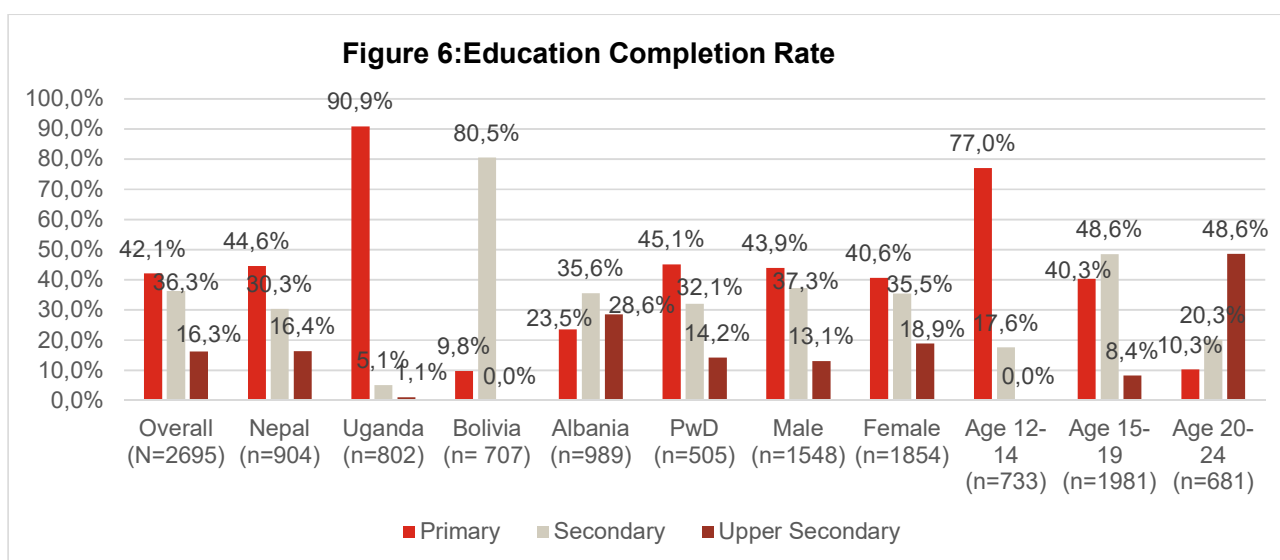
Early marriage has been a long-standing social problem in countries like Nepal and Albania. The national statistics of the country (Sources: UNICEF) reported that the early marriage stood at 1.4% in Albania (2017-2018), 3.4% in Bolivia (2016), 7.9% in Nepal (2019), and 7.3% in Uganda). The data from the current sampled populations of the two countries shows lower rate in case of Nepal while it is higher in case of Bolivia. Due to increasing awareness and governmental prohibitions by laws, this tendency is decreasing as it can be seen in the Figure No. 4 below. Proportion of AYs marrying before the age of 15 is at minimum in both countries, however, the incidents of early marriages in many parts of the country exist according to qualitative data and the sampled population of this study may not have well covered those spots.



The Figure No. 5 below presents findings on those AYs who are currently neither in education, training nor doing any sort of employment activities. The data is available for all countries but Bolivia, and according to it, Uganda has the most alarming situation of AYs in this respect followed by Nepal (at half the rate though). Overall, 27.6% of AYs currently not in education or employment can be deemed as a big social issue that needs to be tackled with strong political will and through NGOs/INGO supports. By gender, the share of male AYs is high on NEET compared to females.



The education completion rate presented in the Figure below is not comparable with the population level education completion rate of AYs, as the country specific samples were not unanimous in picking respondents from different age groups at equal level. Based on samples, however, the overall primary education completion rate is 42% which tend to become lower at secondary (36.3%) and upper secondary level (16.3%). The noticeable data is that the age group of 12 to 14 are the ones who hold the highest share of primary education completion rate which matches with what could be expected of this age range. Persons with disabilities stand almost equal with overall proportions and gender wise, there seems not many differences in the education completion rate.

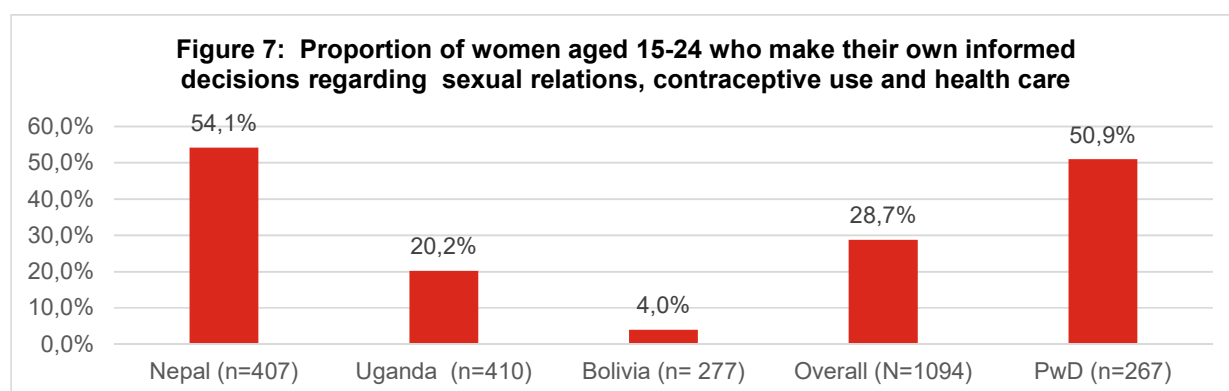


(Bolivia does not include upper secondary data)

4.10 Findings on indicators - Outcome 1: Improve AY choices towards teenage pregnancy and early marriage/Reduce incidents of violence among AYs

This outcome expects to bring changes in behaviours regarding pregnancy, early marriages, and incidents of violence among AYs, including bringing changes in community attitudes and behaviours and developing mechanisms to bring changes in these issues working with service providers and local authorities. The indicators for which data were available from countries responsible to monitor these indicators are reported below.

The indicator below explored among AYs whether they were able to make decisions by themselves or jointly with their partners to use contraceptives, could say 'no' to their partners if they did not want sexual relation or to use sexual and reproductive health care services. Out of those female AYs, who were informed of the services available in their communities and had partners, 29% stated that they could make informed decisions on these issues, highest proportion of AYs being in Nepal and the lowest in Bolivia. In case of Bolivia, very low proportions of AYs were found using contraceptive services which influenced the result of this composite indicator.



The minimum age indicator denotes mean value of marriage age stated by the AYs in response to the question at what age they would like to marry, or they think appropriate to marry. 23 is the overall mean age, however, it differs from country to country and in case of Nepal, it is the legal age that respondents were asked to respond.

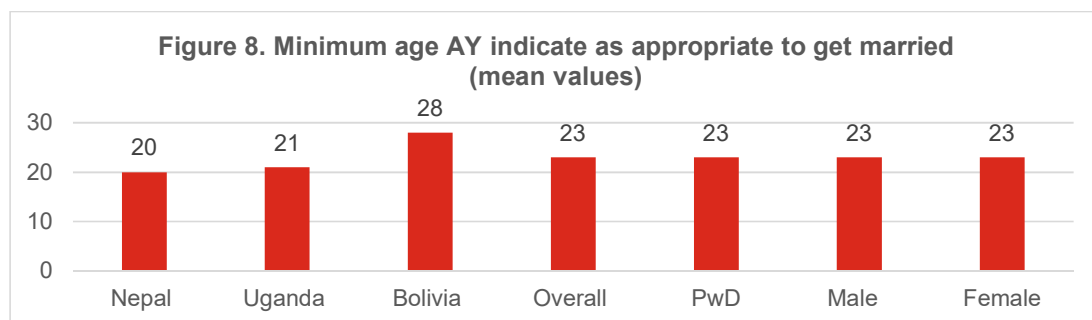
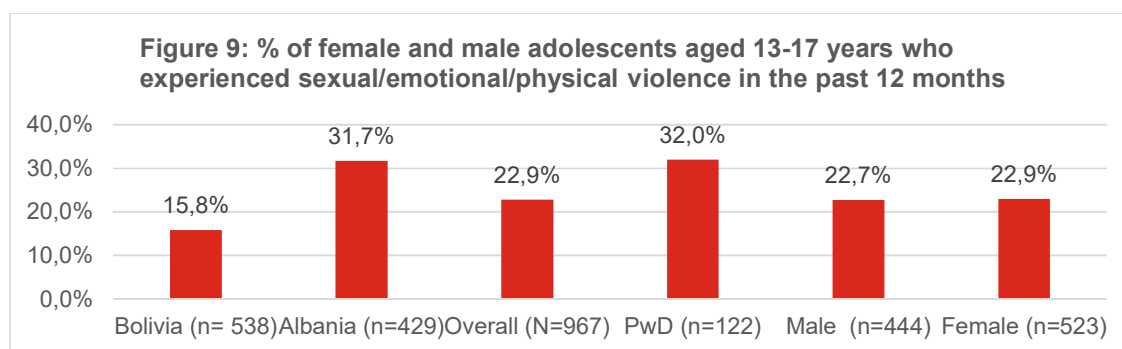
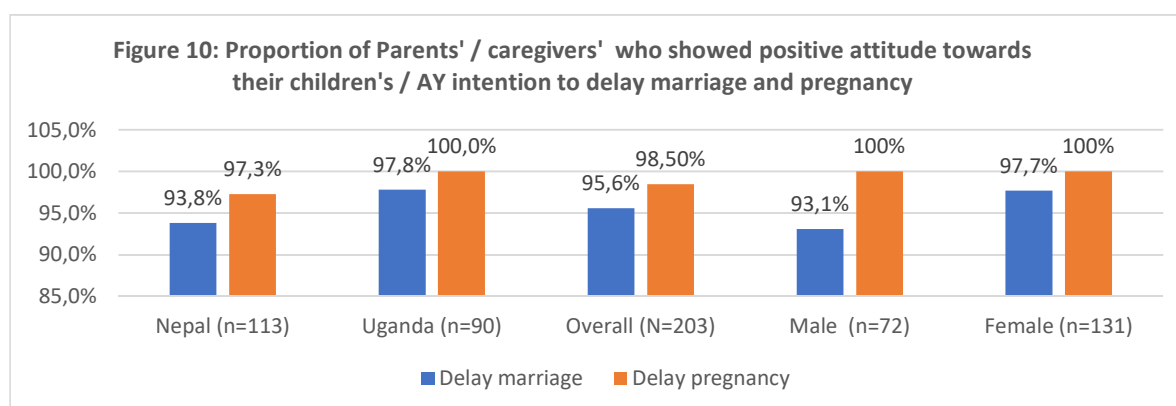


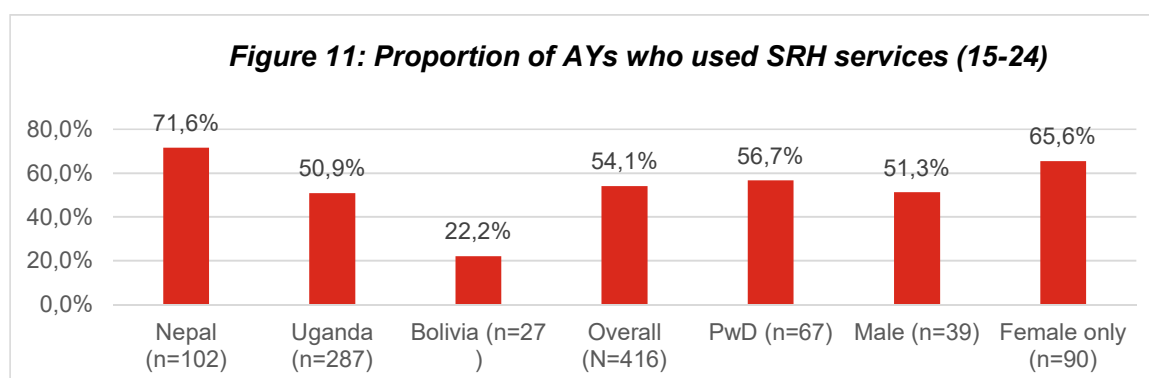
Figure 9 below presents findings of AYs who experienced at least one type of violence (either sexual, physical or emotional) in the past 12 months. Overall, 23% of AYs experienced at least one type of episode of violence in the past 12 month, and by gender, both males and females have equally experienced the violence, although the severity of violence may differ which is not explored in the study. The PWDs reported that they have often experienced emotional violence and the violence rate against PWD by country is found highest in Albania. Domestic violence is high in Albania according to the qualitative data and many cases go unreported; however, a legal support system is now in place which is encouraging PWDs and women to report against violence cases. The incidents of violence mainly took place at home and schools.



Data on the indicator stated in the Figure No.10 below was supposed to be collected by qualitative techniques, however, the countries that were responsible to monitor this indicator used quantitative techniques. In both Nepal and Uganda, almost all parents and caregivers supported the idea of delaying marriage and pregnancy and stated that they fully support their children if they decide to delay either marriage or pregnancy.



Nepal, Uganda and Bolivia monitored the indicator related to the AYs who used sexual and reproductive health services (SRH) available in their communities. Although overall 54% of AYs reported to have used the services, the value of this indicator is not symmetrical among the countries. The reasons in case of Bolivia, for example, was having little knowledge of AIDA services (*Differentiated Comprehensive Care Centre for Adolescents*) among AYs population that take care of adolescents SRH issues. In Nepal, the question was asked to AYs were those whose partners were ever pregnant, and therefore, the value stood high than others. PWDs have also equally used the services compared to their counterparts, although the qualitative data suggests that they are not able to exercise complete voices over the decision-making processes in the use of services.



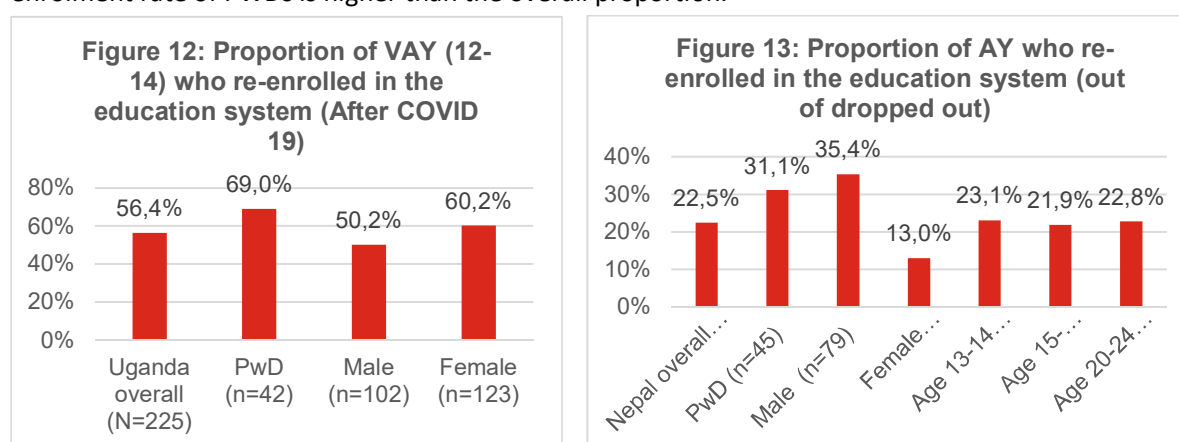
(Gender data does not include Uganda)

4.11 Findings on indicators-Outcome 2: Improve gender transformative and inclusive educational pathways for AYs

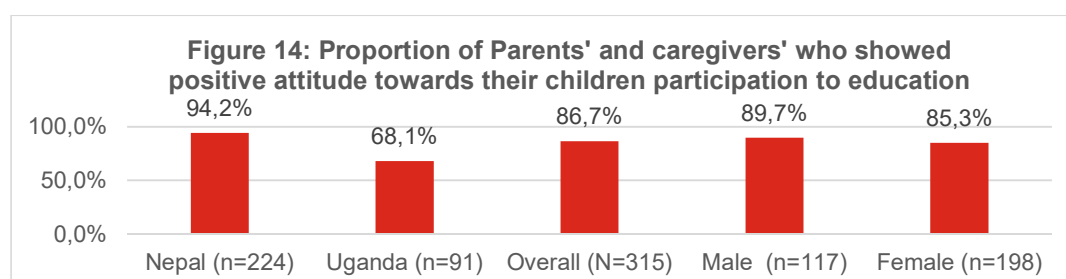
Under this outcome, the program expects to provide equal access to education to AYs, increase parents' awareness and access to education related services, increase literacy rate and create a gender friendly

inclusive education environment for AYs. A set of indicators were developed to monitor this outcome and data on indicators available from countries responsible to monitor these indicators are presented below.

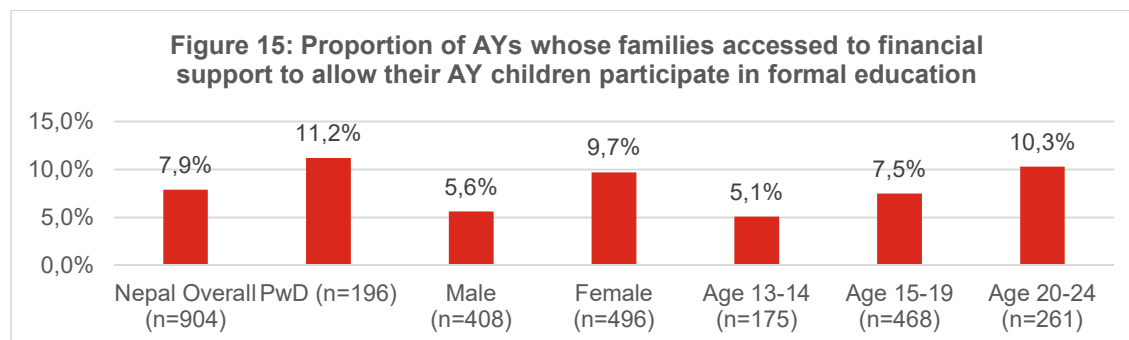
Uganda and Nepal monitored the indicator mentioned in the Figure No. 12 and 13 below. Due to the lack of clear definition of this indicator, Uganda and Nepal calculated them differently, and therefore, their data are presented below separately. Uganda calculated the value as the re-enrolment of children after lockdown, while Nepal took into accounts those AYs who were dropped out and later re-enrolled in the education systems. The findings suggest that in Uganda only 56% of VYAs could re-enrol in the education system after lockdown, indicating that another 44% of VYAs are currently out of school. In case of Nepal, 22% of AYs who were ever dropped out re-enrolled into the education system and noticeably the enrolment rate of PWDs is higher than the overall proportion.



The indicator presented in the Figure No. 14 below is in fact a qualitative indicator reading “parents /caregivers/community members’ attitude towards their AY children’s participation to education”. However, the countries responsible to monitor it used quantitative methods for this indicator (Bolivia missed to report). Due to lack of clear definition of “needs”, education support was chosen to report on the indicator value and therefore, the indicator is rephrased to reflect what data tells. According to the figure below, on average parents and caregivers showed high level of support on the education needs of their children, even though in Uganda, there is over 30% of parents who do not seem to be supportive.



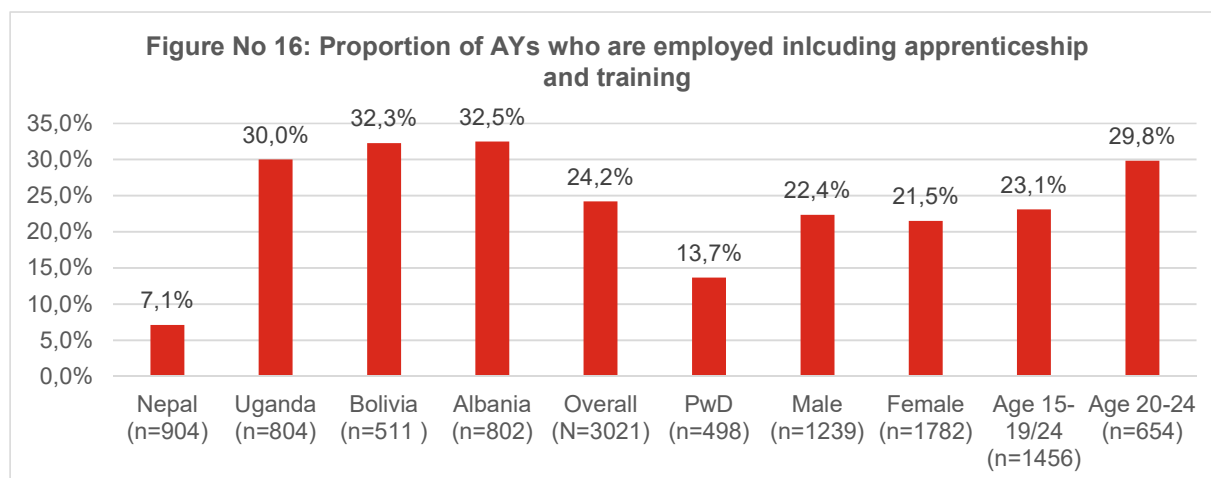
Only Nepal was responsible to monitor the indicator mentioned in the Figure No.15 below. The indicator explored to what extent parents of AYs have been resorted to take education loan to support the children participation in education. While overall only 8% parents of AYs have taken the education loan, higher share of the parents of PWDs have taken education loan. As the age group progresses, the proportion of parents taking loan also increases as shown in the Figure below, due to increasing costs of education for upper grades. (The proportion given in this Figure is of AYs, not parents)



4.12 Findings on Indicators – Outcome 3: Increase decent employment and protection from harmful works

Through this outcome, POWER 4 AYs program expects to empower employment capacity of youths, increasing their capacity through vocational training, access to capital for businesses, and creating a conducive environment for jobs and self-employment with the awareness and introduction of decent working environment.

The overall current employment rate of the adolescents in all countries is 24.2%, with very minor or no differences between male and female AYs accessing employment. By country, Nepal has the lowest rate of youth employment and or engagement in any type of internships. Very low share of PWDs overall is found engaged in any type of jobs or internships. The indicator was supposed to monitor the age group of 15 to 24 years.



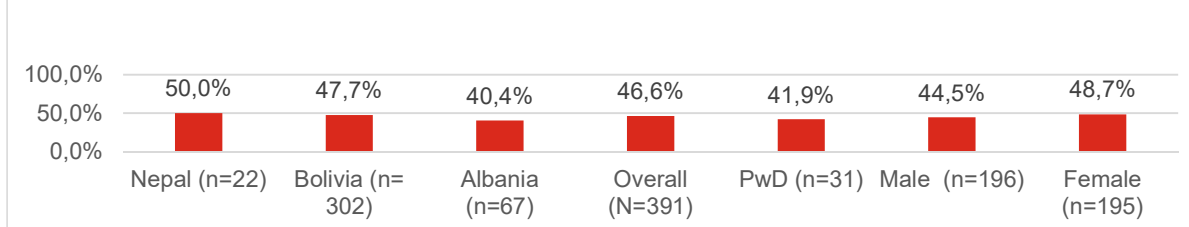
⁸ (Footnote)

The indicator below related to the decent working conditions in the employment included conditions such as signed contract, minimum wage and working hours, social security systems etc. For the sake of this report, the current calculation included signed contract, minimum wage and inclusion in the social security systems depending on the country as minimum variables. The data for Nepal, Bolivia and Albania followed the same procedures, while Uganda could not report on this due to the lack of government definition on minimum wage. It is, however, acknowledged that the indicator has not included all variables in its calculation as could be required according to the UN definitions of the decent works. Going forward, the POWER 4 AY will aim to develop a decent job index which considers the complexity of AY working conditions and allows for some flexibility in view of the different scenarios that can be found.

Out of those who had employments and then had signed contracts with minimum wage and enrolment in the social security, overall, 47% had decent jobs, and gender wise, the share of female AYs is slightly higher than male AYs. Albania furnishes some qualitative data on the thinking of parents on decent jobs according to which a decent job for some parents should include health insurance, minimum 40 hours work per week and receive minimum wage according to the law.

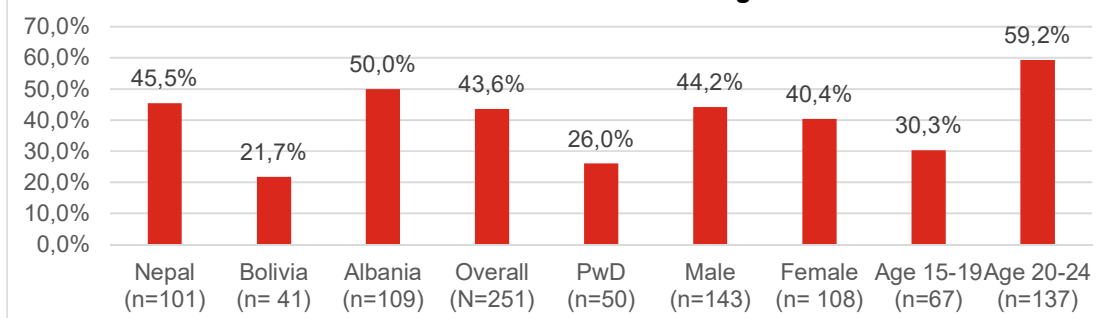
⁸ Uganda reports on age 15-24, Albania 15-19 to 20- 24, and Nepal reports all age categories and therefore age wise disaggregation data does not match.

Figure 17: Proportion of employments that provide for decent working conditions



Overall, in all countries, 44% of employed or self-employed AYs earn income equal to or higher than the country's minimum wage fixed by the government. Slightly higher proportion of male AYs have higher income than NMW (National Minimum Wage) compared to female AYs, while comparatively less proportion of PWDs earn equal to or higher than NMW. Uganda could not report on this indicator due the same reason as stated above.

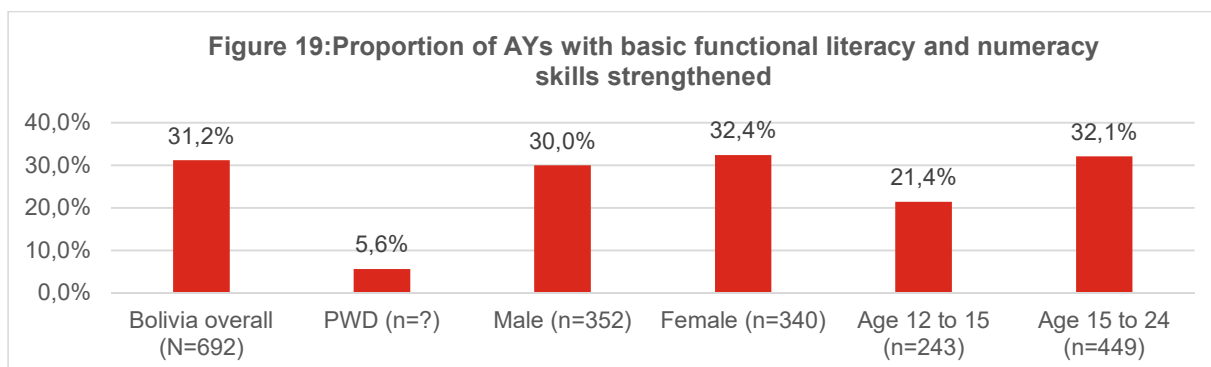
Figure 18: Proportion of AYs whose income is equal to or higher than the national minimum wage



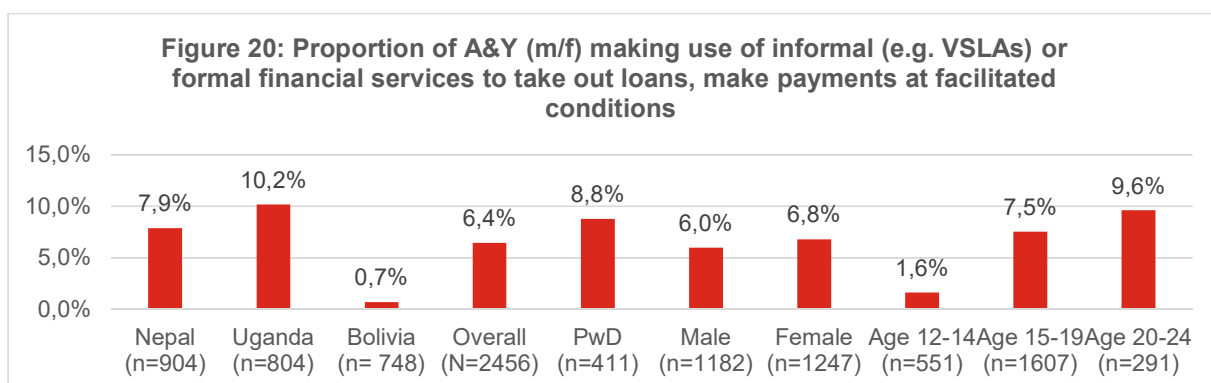
⁹ (Foot note)

Nepal and Bolivia were responsible to monitor the indicator presented in the Figure No. 19 below. However, only Bolivia was able to furnish data. Data for this indicator was collected with a set of questions on basic functional literacy and numeracy skills and the same questionnaire was applied to all age groups. While overall 32% of AYs were found strengthened on numeracy and literacy skills, PWDs and AYs of age group 12 to 14 were found weak in this respect and in general there is a need to promote literacy and numeracy skills among AYs.

⁹ Age group data on 15 to 19 years missing in case of Bolivia



Very low proportion of AYs overall (6.4%) have accessed banks, local VSLAs or cooperatives to get loans for their business or study purposes. This may be explained as majority of them are following their studies. The job seekers or self-employment planners will be the AYs of the age group of 20-24 who may need loans for trainings or businesses and according to the qualitative data, AYs tend to access VSLAs and Cooperatives for loans rather than banks particularly in Uganda and Nepal.



4.13 Findings on Indicators—Outcome 4: Improve policies, frameworks, strategies, systems, services, networks with and for AYs

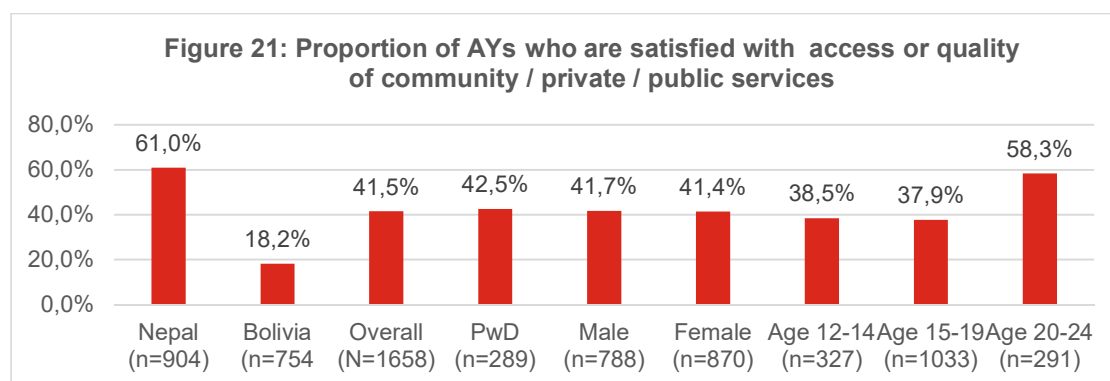
Through this outcome, the program expects to promote inclusive and participatory policies and frameworks that support development of AYs friendly government services and programs according to their needs and aspiration. There is in general in all countries a lack of sufficient qualitative data to report on some of the qualitative indicators under this outcome. Based on available data, one only qualitative indicator below is reported.

Indicator: # of AY networks/clubs active in promoting AY rights-

For this indicator, there are no direct data telling us how many networks or clubs are active that promote AY rights. Besides what has already been reported under paragraph 4.7, countries report that AYs participate in local networks and clubs that promote several issues including AYs' interests. Bolivia provides a list of government municipalities and some departments that in general work for youths and some exclusively work for persons with disabilities. In Nepal and Albania, AYs are involved in different types of groups such as advocacy, environmental groups, local clubs, and sports clubs. In both countries, youth councils in municipalities are created to work for the interest of the youths, however, they are not fully explored and accessed by AYs.

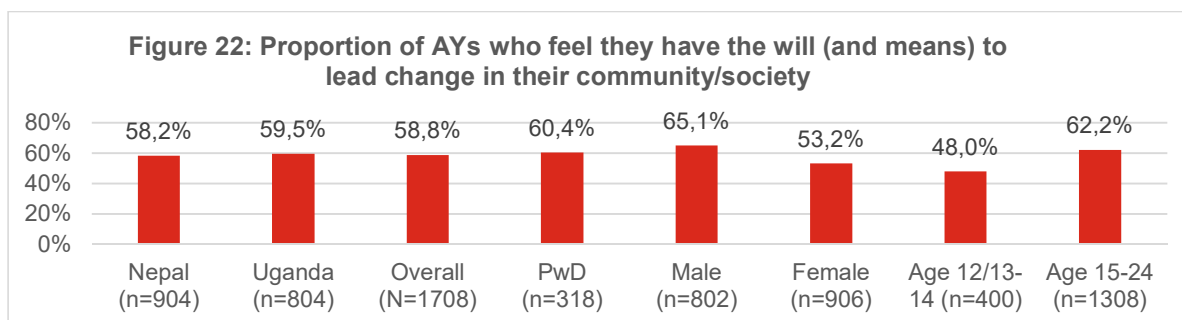
The indicator presented in the Figure 21 below is a composite indicator calculated based on the responses of AYs on 10 questions related to AYs satisfaction with the service providers in their municipalities. The types of questions asked were satisfaction related to youth services, health facilities, participation of youths in municipal decision-making processes, rehabilitation care for AYs, sport activities, prevention of violence and so on. The mean values of the 10 questions reported by Nepal and Bolivia are presented below (Other countries were not responsible to monitor this indicator).

The satisfaction level of AYs on the community services available to them is high in Nepal while it is very low in Bolivia in the range of 17% to 18% for all disaggregation types. According to the figure below, higher proportion of AYs of the age range of 20 to 24 years are more satisfied than other categories.



The figure 22 presents findings on a cross-cutting indicator that explored if the AYs had will and means to lead changes in their communities. Uganda reported both will and means, while Nepal reported only the will of AYs, and therefore, the findings summarize only the “will” part of the indicator.

Overall, 59% of AYs reported that they had the will to lead changes in their communities. The share of the will power was less among female AYs while the PWDs showed equal level of will to lead and contribute to the societies.



5 Conclusions

- The current prevalence rate of disability among AYs stands at 10% for all countries.
- Differences exist between persons with disabilities and without disabilities both positively and negatively. While some countries provide government support to AYs for employment and other facilities, others not which has resulted in higher employment rate in some countries. But, in general, PWDs are found less capable for self-decision making, low access to health services and information and employment.
- The tendency for early marriage is decreasing in all countries but the tradition still exists.
- COVID 19 left many children out of schools even after the opening of the schools which resulted in child labour.
- Water and sanitation conditions of schools are improving than past, but the facilities are not adequate to meet the demands of the students and the quality is poor.
- Menstrual hygiene condition is found poor in all schools in all countries and female AYs lack needed information and support related to this topic.
- Actions related to address negative effects of climate change are not happening in the survey areas of any country. Many AYs and community people lack sufficient knowledge and information about this issue.
- 28% of AYs are neither in education or in employment and training and the situation is alarming in Uganda (53%.)
- Uganda faces a serious issue of non-enrolment of children (44%) back to the school systems after lockdown.
- The numeracy and literacy skills among Bolivian AYs is low and other countries may be facing the same situation.

Power for AYs-Baseline Synthesis Report
August 2022



Save the Children®

INDEX 1: INDICATOR TABLE

SN	Indicators	Overall	Nepal	Uganda	Bolivia	Albania	Male	Female	PWD	12-14	15-19/24	19-24
1	Disability prevalence rate among AYS	10.9%	4.4%	12.2%	12.3%	12.2%	10.9%	11.8%	-	13.0%	8.7%	10.9%
2	Proportion of women aged 12-24 years who were married or in union before age 15	3.7%	2.4%	-	-	4.3%	-	-	1.9%	-	-	-
3	Proportion of youth aged 15-24 years NOT in education, employment or training (NEET)	27.6%	27.8%	53.2%	-	15.3%	35.8%	25.6%	29.4%	-	-	-
4	Education Completion Rate											
	Primary	42.1%	44.6%	90.9%	9.8%	23.5%	43.9%	40.6%	45.1%	77%	40.3%	10.3%
	Secondary	36.3%	30.3%	5.1%	80.5%	35.6%	37.3%	35.5%	32.1%	17.6%	48.6%	20.3%
	Upper secondary	16.3%	16.4%	1.1%	-	14.2%	13.1%	18.9%	14.2%	0%	8.4%	48.6%
5	Proportion of women aged 15-24 who make their own informed decisions regarding sexual relations, contraceptive use and health care	28.7%	54.1%	20.2%	4%	-	-	-	50.9%	-	-	-
6	Minimum age AY indicate as appropriate to get married	23	20	21	28	-	23	23	23	-	-	-
7	% of female and male adolescents aged 13-17 years who experienced sexual/emotional/physical violence in the past 12 months	22.9%	-	-	15.8%	31.7%	22.7%	22.9%	32%	-	-	-
8	Proportion of Parents' / caregivers' who showed positive attitude towards their children's / AY intention to delay marriage	95.6%	93.8%	97.8%	-	-	93.1%	97.7%	-	-	-	-
9	Proportion of Parents' / caregivers' who showed positive attitude towards their children's / AY intention to delay pregnancy	97.3%	100%	98.5%	-	-	100%	100%	-	-	-	-
10	Proportion of AYs who used SRH services (15-24)	54.1%	71.6%	50.9%	22.2%	-	51.3%	65.6%	56.7%	-	-	-

SN	Indicators	Overall	Nepal	Uganda	Bolivia	Albania	Male	Female	PWD	12-14	15-19/24	19-24
11	Proportion of VAY (12-14) who re-enrolled in the education system (After COVID 19)-Uganda	-	-	56.4%	-	-	50.2%	60.2%	69%	-	-	-
12	Proportion of VAY (12-14) who re-enrolled in the education system (dropped out)-Nepal	-	22.5%	-	-	-	50.2%	60.2%	31.1%	-	-	-
13	Proportion of parents' and caregivers' who showed positive attitude towards their children participation to education	86.7%	94.2%	68.1%	-	-	89.7%	85.3%	-	-	-	-
14	Proportion of AYs whose families accessed to financial support to allow their AY children participate in formal education	-	7.9%	-	-	-	5.6%	9.7%	11.2%	5.1%	7.5%	10.3%
15	Proportion of AYs aged 15-24 who are employed including apprenticeship and training	24.2%	7.1%	30%	32.2%	32.5%	22.4%	21.5%	13.7%	11%	23.1%	29.8%
16	Proportion of employments that provide for decent working conditions	46.6%	50%	-	47.7%	40.4%	44.4%	48.7%	41.9%	-	-	-
17	Proportion of AYs whose income is equal to or higher than the national minimum wage	43.6%	45.5%	-	21.7%	50%	44.2%	40.4%	26%	-	30.3%	59.2%
18	Proportion of AYs with basic functional literacy and numeracy skills strengthened	-	-	-	31.2%	-	30%	32.4%	5.6%	21.4%	-	32.1%
19	Proportion of A&Y (m/f) making use of informal (e.g., VSLAs) or formal financial services to take out loans, make payments at facilitated conditions	6.4%	7.9%	10.2%	0.7%	-	6%	6.8%	8.8%	1.6%	7.5%	9.6%
20	Proportion of AYs who are satisfied with access or quality of community / private / public services	41.5%	61%	-	18.2%	-	41.7%	41.4%	42.5%	38.5%	37.9%	58.3%

21	Proportion of AYs who feel they have the will (and means) to lead change in their community/society	58.8%	58.2%	59.5%	-	-	65.1%	53.2%	60.4%	48%	62.2% (15-24)	-
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ANNEX 2: Cross cutting research questions (For details, please refer to common ToR)

Area	Research Question	How we answer it
1. Disability / Agile and Inclusive (Enabler) / 3rd Guiding Principle (GP)	1.1 What is the prevalence of disability among our target population? What type of disability do they have? What are the common disability types and what are these in order of frequency of occurrence?	Washington Groups Short baseline survey.
	1.2 What are the key barriers children with disabilities experience that they feel hold them back from developing, growing, and transitioning successfully into adulthood?	baseline survey
	1.3 What key difference is there for children with disabilities while accessing basic services, development opportunities (including skills development, internships, education opportunities, SRHR; GBV and health services) in comparison to children without disabilities?	baseline survey
	1.4 What key differences are there in the confidence, life goals and planning for the future between children with disabilities and those without?	baseline survey
2. Gender transformative / 3rd GP	2.1 What is the incidence of early pregnancy and early marriage among our target population? (check if data is already available) What are the key reasons and causes for early pregnancy?	baseline survey
3. COVID	3.1 What is the impact of COVID19 pandemic and how has that impacted on AYs daily life? Are AYs going to school / working / spending time with their peers / staying more at home? What new prospects are AYs resorting to for overcoming the impact from pandemic?	baseline survey

	3.2 What is the extent to which child labour is being used in response to the impact of the COVID-19 pandemic at family level? What opportunities are there for the programme to mitigate these negative responses such as increase in child labour, etc.?	baseline survey
4. WASH	4..1What is the level of sensitivity and capacity of schools / Learning Centres to promote awareness + good practice in menstrual hygiene / SRH? Are schools / learning centres able to meet AY needs and demands in these areas?	baseline survey
	4.2 Are AY participating to improving menstrual hygiene/SRH services in their community (at schools/LC, health facilities, youth clubs, etc)?	baseline survey
	4.3 Are AY satisfied with the services received (considering age, gender and disability sensitivity)?	baseline survey
5. Climate Change	5.1 How sensitive/aware are AYs and their community to/of the Climate Change? What do they know on issues related with climate change with respect to mitigation, adaptation and their country policy?	baseline
	5.2 What concrete potentials do AYs demonstrate to contribute / lead a change to climate change adaptation / mitigation (including on WASH) in their specific contexts? How can the programme leverage on this potential?	baseline survey
6. AY agency /Shift the power (Enabler) / Participation (2 nd GP)	6.1 Are targeted AY part of any network, organized group (live / online)?	Baseline survey
	6.2 What areas are AY networks / groups (live /online) active on?	Baseline survey
	6.3 What are the areas and at what level of the socio-ecological model and through what channels/actions can AYs be most successful in bringing about a change?	Baseline survey

	6.4 What would they need to be more empowered to become agents of change?	Baseline survey
	6.5 What barriers do girls and young women face in their equal participation and capabilities to lead a change??	Baseline survey
7. Age-specificity/ 3rd GP:	7.1 What path are AYs currently preferring between education and employment opportunities and why so? (Disaggregate by age, gender, urban / rural)	baseline survey

6 References

Kica, R.O., Johnson Owonda Komagum. (2022), Baseline Report for Pathways to Wellbeing, Empowerment and Resilience for Adolescents and Youth Programme in Uganda. Kampala: DevOptions Consulting LLC.

Lasha, J., Muja, B., Nesturi, M., Hasmuja, E., Topalli, B., Osmanaga, F., (2022), Baseline Study for Save The Children Albania Country Office “Pathways to Wellbeing, Empowerment and Resilience for Adolescents and Youth (Power 4 Ay)”.

Adhikari, R., KC, R., Neupane, S., Pariyar RK, Ojha R, Paudel T, Tiwari DP, Acharya DP et al, (2022). Baseline study on Pathways to Wellbeing, Empowerment and Resilience for Adolescents and Youths (POWER 4 AY). Center for Research on Education Health and Social Science (CREHSS). Nepal

Baseline study on Pathways to Wellbeing, Empowerment and Resilience for Adolescents and Youths (POWER 4 AY- Bolivia)

Common ToR/Common MEAL PIR/Indicator Framework/AY Wellbeing Frameworks and other related documents