

# A Project of the Child, Adolescent and Young Adult Health and Wellness Unit Ministry of Health, Guyana



Camp Lethem, December 2004

# ACHIEVEMENTS FOR 2004

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#### **BACKGROUND**

## The State of World's Population, 2003:

"....Over 1.2 billion adolescents - one person in five - are making the transition from childhood to adulthood. How well we prepare them to face adult challenges in a fast changing world will shape humanity's common future. Adolescents must be enabled to avoid early pregnancy, sexually transmitted infections and HIV/AIDS while being given skills, opportunities and a real say in development plans. Around the world, innovative programmes are teaching adolescents about reproductive health and showing how relevant health services can be made more "youth-friendly" to increase their use. Laws and policies are being revised to give greater attention to adolescents' needs and rights. Not investing in such efforts will perpetuate poverty, inequality, unsustainable population growth and HIV/AIDS...."

# International Support for the Health of Young People

The promotion of a comprehensive health agenda for young people has its roots and development in international agreements such as the United Nations Convention on the Rights of the Child, the Convention on the Elimination of All Forms of Discrimination Against Women, the 1994 International Conference on Population and Development, the 1995 Fourth World Conference on Women and the United Nations World Programme of Action for Youth to the Year 2000 and Beyond.

The World Health Organization, United Nations Population Fund and the United Nations Children's Fund have strongly supported adolescent health laws, policies and programming and convened a joint Study Group on Adolescent Health. The Convention on the Rights of the Child noted that by right, adolescents need to be provided with information and opportunities for skills building, receive counseling and adequate health services, and live in a safe and supportive environment. The international community is calling on individual countries to strengthen their adolescent health programming.

#### **GUYANA's RESPONSE:**

In reflection of this international calling and in light of distressing indications of high rates of teenage pregnancy, HIV, STIs, and abuse of tobacco, alcohol and drugs in Guyana, the Ministry of Health has prioritized late childhood, adolescence and young adulthood as important life-stages for health promotion and intervention within its National Health Plan. The Ministry of Health endorses the WHO philosophy that during both the late childhood stage and the adolescent stage there are ideal outcomes and areas of intervention. These areas of intervention are:

Phase	Priority areas of intervention	
Late	<ul> <li>Adequate varied diets with sufficient micro-nutrients</li> </ul>	
childhood	<ul> <li>Promotion of healthy lifestyles</li> </ul>	
	<ul> <li>Prevention, early recognition and management of infections, infestations and injuries</li> </ul>	
	Regular de-worming	
	<ul> <li>Prevention, early recognition and management of mental health problems</li> </ul>	
	<ul> <li>Detection and management of vision and hearing disabilities</li> <li>Detection of and attention to learning disabilities</li> <li>Universal school enrollment</li> </ul>	
	<ul> <li>Opportunities to lean and play in a child-friendly environment</li> </ul>	
	Opportunities to develop healthy relationships with peers	
	<ul> <li>Protection from risk behaviours such as early sexual debut,</li> </ul>	
	tobacco, alcohol, and drugs use	
	Protection from child labor	
	<ul> <li>Promotion of healthy school environments that facilitate the</li> </ul>	
	physical and psychosocial well-being of children	
Adolescence and Young	<ul> <li>Promotion of healthy development and lifestyles including adequate diet, regular exercise, good oral hygiene</li> </ul>	
Adulthood	<ul> <li>Prevention of health risk behaviours including use of tobacco,</li> </ul>	
	alcohol and other substances, and early sexual debut and/or unsafe sex	
	<ul> <li>Delay in age of marriage and child bearing</li> </ul>	
	Access to appropriate adolescent-friendly health services for	
	family planning, pregnancy and childbirth, prevention and care	

- of STI, HIV, and other infectious diseases, nutritional deficiencies, injuries and mental health problems
- Access to counseling services, including HIV testing and counseling
- Enhancing capacity of adults, including within the family, to provide caring and responsible relationships with adolescents
- Promotion of healthy school environments that facilitate the physical and psychosocial well-being of adolescents
- Opportunities to develop healthy relationships with peers
- Opportunities to participate in and contribute to pro-social activities in the community
- Opportunities to continue education or vocational training in healthy (school) environments
- Protection from hazardous child labor
- Protection from harmful cultural practices including marriage before social and biological maturity

# Creation of the Child, Adolescent and Young Adult Health and Wellness Unit (CAYAHWU)

In October of 2002, the start of a specific unit to focus on these priority areas within child, adolescent and young adult health and wellness began as a special project under the guidance of the Office of the Minister. The vision for the unit is that: children, adolescents and young people live in a health promoting environment that responds appropriately to their health needs, fostering the highest attainable standard of health and development, enabling them to achieve their full potential.

Currently, a strategy is being developed through funding from UNICEF to operationalize this unit, formalizing it within the Ministry of Health structure and budget by 2007. The unit will be concerned with health promotion, access to services, enabling environments, and progress tracking. Currently, the main programs of the unit are: the Health Promoting Schools Initiative, the Youth Friendly Health Services Initiative, and the HIV Prevention Project for Youth in Especially Difficult Circumstances. A director will be hired by the end of March 2005 with funding from UNFPA for up to three years, technical assistance will continue to be provided by a

Michigan Fellow funded by USAID for two additional years, a Health Promotion Coordinator will continue to be contracted by PAHO for up to two years, and a Peace Corps Volunteer will be assigned directly to the Health Promoting Schools Initiative for the next two years.

## Health Promoting Schools Initiative (HPSI):

The Minister of Health has taken a special interest in the creation of a Health Promoting Schools Initiative within CAYAHWU. The Minister believes in the promotion of healthy lifestyles for young people, and also in engaging young people as change agents in the promotion of healthy living for their respective families, school-mates and community members. Through HPSI, secondary level students are able to become a part of this vision.

The main thrust of the initiative has been the formation of school health clubs in secondary level schools throughout Guyana. These health clubs are intended to be a way for young people to be positively engaged in productive activities, learn about healthy behaviours and lifestyles, take responsibility for their own health and health promotion in their schools, and generate positive peer norms as they make the transition from childhood to adulthood. The intention is for every secondary level school in the country to have its own health club.

### ACHIEVEMENTS of HPSI 2004

The Ministry of Health was fortunate to receive generous financial support from three members of the United Nations Country Team in Guyana for the Health Promoting Schools Initiative in 2004: UNDP, UNICEF and PAHO. With this support, 32 health clubs have been formally launched thus far and at least 20 more are expected to be launched during the first half of 2005. A national network of health clubs was formed and named, a motto and a logo were produced; regional representatives were elected, and clubs held a variety of activities as well as joined with other clubs to carry out regional activities. Three national workshops were held in three regions of Guyana, a manual was created, a survey was carried out, newsletters were produced each term, and a resource library with a database was created.

#### The National Network of School Health Clubs:

The national network of school health clubs was formed in December 2003 at a workshop at the Ministry of Culture, Youth and Sports' Madewini camp, where Health club members discussed the value of networking clubs together at both a regional and a national level. Thus, clubs can learn from one another, motivate one another and have common activities that have a wide reach. Through a group process this network was formed and named the, "National Youth Health Organization", with the accompanying motto, "Guyanese Youth Promoting Healthy Lifestyles".

The goals of the network are as follows:

- To improve communication between health clubs in the regions
- To create a body that can be recognized internationally, and can be an advocate on health issues and policies
- To increase the level of organization among and between health clubs
- To be more effective in the promotion of healthy lifestyles in Guyana through working collaboratively
- To carry out activities with a broader regional or national-level focus
- To organize national-level workshops

Logo: A logo was chosen through a network contest in August of 2004:



# National Board and Regional Representatives:

One student and one teacher from each region are nominated and elected to the office of Regional Representative to the national board at the beginning of each school year and meet every six weeks to discuss the progress of the clubs in their respective regions, determine the direction of the overall program, and plan activities and campaigns. In August of 2004, representatives were nominated and elected from seven regions to serve a one-year term. It is hoped that in 2005, the remaining three regions can be incorporated into the board. During meetings, the business section of the meeting occurs in the morning, and a technical topic is presented in the afternoon so that representatives can learn about current issues in adolescent health promotion, and be ready to discuss these issues with clubs in their regions. Regional Representatives and have received special identification badges for use during visits to schools and regional offices.

#### Club Formation and Activities:

Health clubs follow Ministry of Health recommended guidelines in their formation and are launched with the Minister of Health in attendance, who gives the club an official certificate. The Child, Adolescent and Young Adult Health and Wellness Unit gives ongoing guidance and supports the development of the clubs. Staff from the unit visit each club at least once per term and attend launchings of each new club, as well as the activities of older clubs. Staff also link the club with relevant resource persons and material as requested. A small library of resource material has been catalogued for this purpose.

Upon forming, clubs elect executive members and create their own objectives and activity plans with guidance from the Ministry of Health and their teacher-advisors. Clubs choose their focal areas within the realm of healthy lifestyle development; this may include themes such as the prevention of HIV and AIDS, good nutrition and fitness, or environmental health. In 2004, health club activities included:

- Club-to-club health camps
- Peer education workshops
- Tours of local health facilities
- School clean-up campaigns

- Sports days
- HIV/AIDS/STI information-sharing sessions
- Role plays on drug and alcohol abuse and prevention
- Health promotion activities at health centers
- Health concerts/debates/panel discussions/ assembly presentations/ door-to-door campaigns/poster competitions
- garbage incinerator construction projects

Clubs must submit an Activity Form one month from the start of each school term, listing both the activities that they have planned for the term, as well as those they were able to successfully carry out in the last term. If this form is not submitted, then clubs are not extended invitations to send delegates to national camps.

## Regional Activities:

Through the guidance of the Regional Representatives, clubs in each region are encouraged to work together on special health promotion projects of their choosing. One such regional activity, a clean-up and environmental sensitization was carried out by Region 6 health clubs at Beach 63 (please see newsletter article below, submitted by Skeldon Line Path's health club):

The # 63 beach clean up was held on March 28, 2004, with four schools and 50 students in attendance. Overall, the day was a great success. Students arrived between 11:00 and 12:00 and the program got underway at noon. After a quick lunch, a brief discussion was held regarding littering. The students were asked why they thought they were at the beach, why it is necessary to clean the beach and the negative effects of littering were discussed. Students seemed to understand that this activity was a small step in reducing litter in Guyana. They agreed that the most lasting impression from the day's events would be the knowledge and experience that they gained. They vowed to take the new knowledge with them to share it with their families and friends.

Students were then divided into small teams in which they proceeded to collect litter from the beach. Over 50 large garbage bags were filled in less than 45 minutes. Filled bags were carried back to the main meeting point where a teacher was standing by to examine bags and mark scores for teams. Students worked diligently until we ran out of garbage bags. During the clean up the Minister of Health arrived to show his support for the students. When all of the bags had been filled we had a brief closing discussion, the Minister shared a few words of support and we had a brief awards ceremony. The remainder of the afternoon was spent enjoying games and swimming.

## National Activities/Workshops and Forums:

In March of 2004, the network signed onto the "Me to You: Reach One - Save One" Campaign, the Ministry of Health's HIV behaviour change campaign. Through this campaign, health clubs were able to mobilize thousands of people throughout Guyana who pledged to prevent the spread of HIV and respect those persons living with HIV and AIDS. At this time, over 60,000 persons have signed on to the campaign, and the health clubs were instrumental in this success.

One of the main activities for the health club network has been the planning and execution of three national health workshops/camps in 2004. These were held in different locations throughout Guyana during school breaks in April, July and December. The events are essentially skills building workshops for health club members, but include a lot of healthy fun too and thus are presented as camps. Each health club is invited to send two students and one teacher to these camps. The first two camps had at least seventy-five percent of clubs in attendance, whereas only one school declined the invitation for the December camp. The April camp was held at Bush Lot, Corentyne, Region 2 with the theme, "Peer Education Training for School Health Clubs". The August camp was held at St. Monica's Mission on the Pomeroon River in Region 2, and was entitled, "Health Skills for Life" (please see agenda for this camp on following page). The December camp was held in Lethem, Region 9, with the sexual and reproductive health theme, "Value Your Body, Value Yourself." On the return bus trip from Lethem to Georgetown, Participants were also able to get the opportunity to visit the canopy walkway in Iwokrama, the national rainforest and learn about environmental health issues.

These camps offered opportunities for active health club members to learn more about the health issues that affect them, learn from one another, get ideas for club, regional and national activities, and visit places in Guyana that they may have never visited otherwise.

Camp Pomeroon Sessions	Monday, July 5 <sup>th</sup>	Tuesday, July 6 <sup>th</sup>	Wednesday, July 7 <sup>th</sup>	Thursday, July 8th	Friday, July 9 <sup>th</sup>
#1: 8:00-10:00am		Trust activities and Group Work	Discrimination and Racism  Facilitated by Ms. Grace	First Aid	(Breakfast Meeting with Teachers for reimbursement)
0.00 10.000111			Tabilitated by Wis. Craec		Tombalsomenty
Break					Closing Ceremony
#2:		Developing Leadership and Communication Skills	Youth Advocacy and Activism	Teen Pregnancy	Departure
10:15- 12:15pm		COMMUNICATION SKINS	"Me to You: Reach One - Save One" Skit Performed by Regional Reps	Facilitated by Nisha Dean and Trovana Azeez, Regional Reps	
Lunch				Filaria	
				Facilitated by Tamsin Durand and Sarah Pace	
#3: 1:15-3:15pm	Arrival	Assessing Community Needs and Guyanese/Caribbean Health Issues	Club Updates and Sharing Health Club Ideas	Nutrition	
Break		Facilitated by Lydia Fraser, Red Cross	Facilitated by Jennifer Miller, Ministry of Health		
#4:	Orientation Session and Name Games	Lessoning Planning	Responsible Sexuality and HIV/AIDS	Mini-Olympics and Sports Games	
3:30-5:30pm	and Name Games		HIV/AIDS		
Dinner	Sports	Sports	Sports		
Evening Feature: 7:30-10:30pm	Team-building exercises and	Mural Painting and Arts & Crafts	Campfire	Election of Regional Representatives	
7.30-10.30pm	icebreakers	Grans		Variety Show	
				(Distribution of materials and instructions for departure)	

Health clubs were also invited to participate with environmental clubs in a University of Michigan sponsored 'Youth Forum on Conservation, Ecology and Population" that was held in Georgetown in September. The Forum addressed many emerging environmental issues and charged club members with advocacy and action. It was also a unique opportunity for health and environmental clubs to work together and synergize their efforts. Action Plans were crafted and carried out (Please see sample activity plan on next page):

#### Manual:

A manual was developed in October of 2004 by a Peace Corps Volunteer assigned to the Child, Adolescent and Young Adult Health and Wellness Unit that includes information for health clubs on how to get a health club started, information about the National Youth Health Organization, suggestions on how to plan and carry out activities, recruit resource persons and locate materials, as well as information sections on over 20 different health topics that health clubs in which clubs have expressed interest. This manual has been shared out with all existing health clubs and will be given to each new health club on the occasion of their official launch. The manual will be reviewed and updated on a periodic basis (please find manual attached to this report).

## Survey:

A health knowledge, attitudes and behaviours survey was designed by the Unit and conducted in thirteen health clubs in seven regions to determine a baseline for the Health Promoting Schools Initiative. The results of this survey will be available at the end of February 2005. A follow-up to this survey will be carried out at the end of the 2004-2005 school year and every year thereafter to detect changes in knowledge, attitudes and behaviours of health club members. The questions contained in the survey were based on those contained in the Behavioural Surveillance Survey for HIV/AIDS the Youth Risk Behaviour Survey, and the Global School Based Health Survey (please find survey attached to this report).

# Youth Forum Action Plan Chart for 8th of May Secondary School Environmental and Health Clubs

What is the goal?	What activity will you carry out?	What needs to be done for this activity?	By whom?	By when?
1. To have a cleaner environment	Clean up campaign     Place bins on roadside.	<ul> <li>Finances to purchase garbage bags and gloves, each class to contribute \$1000.</li> <li>Ask business within communities for drums to make bins.</li> </ul>	Head teachers of 8 <sup>th</sup> May Secondary, Primary and Nursery. Vincent, Robbie, Chris and Joe to make bins.	18 <sup>th</sup> October, 2004
2. To appreciate our natural resources and beauty	Nature walk     Catchments area     hike	<ul> <li>Advisor will visit site at least 1 week before date</li> <li>First aid training</li> <li>Locate ranger/guide</li> </ul>	Permission granted by parents and school. Each student prepare snack.	23 <sup>rd</sup> October, 2004
3. To strengthen health and environment clubs in Region # 2.	Joint Clubs Seminar	<ul> <li>Finance acquired for Traveling and snack</li> <li>Resource Personnel from E.P.A, W.W.F and Ministry of Health invited</li> <li>Bring and Buy Sales by each club raising funds to offset expenses</li> </ul>	Clubs Leaders, Regional Coordinator and Resource Personnel	19 <sup>th</sup> November, 2004
4. To educate students of their roles in today's world. To help students to be health conscious.	Weekly environment talks     Observing environmental days (other related issues)     Start a health club.	- Reach personnel/Info - Accurate facts from Office G/town.	Clubs Leaders; advisor, members, Resource personnel.	27 <sup>th</sup> October, 2004 – 3 <sup>rd</sup> January 2005.

#### Newsletters:

The National Youth Health Organization established its own newsletter, and invites submissions from all health club members, including articles on activities that have been carried out, as well as general health articles and games. This is an opportunity for clubs to publicize their successes and share ideas with other clubs (please find a copy of the latest newsletter attached to this report).

# **Updates:**

At the beginning of every term, the Unit compiles an update letter for clubs, school administration and regional authorities to keep them abreast of recent and upcoming activities, relevant issues and advisories. This letter is sent along with the newsletter for the term. Recipients are encouraged to contact the unit with questions, suggestions and contact information for potential clubs.



# 2004 HPSI Output Matrix and Report Card:

Planned	Outputs	Accomplished Outputs	Challenges
1. 45 clu a. b. c.	bs launched by mid-2004  Unit liaises with MoE, Peace Corps Volunteers, Voluntary Service Overseas  Volunteers, UN Volunteers, existing school health clubs to locate new sites  Unit discusses health promoting schools initiative with  headmaster/headmistress, potential teacher-advisors and students at schools to encourage them to launch clubs  Clubs prepare membership list, elect leadership, determine goals and objectives and name club  Clubs prepare a launching event to include Minister, MoH staff and other invited quests	32 Clubs were formally launched by the end of 2004, and twenty others were in development to be launched.	Many clubs have been formed and are carrying on with work, but the difficulty at times lies in getting a formal launch completed due to scheduling challenges between the MoH and the MoE.
2. Clubs objec a. b.	create an activity plan every 3 months, specific to their goals and	All clubs have been given support to create activity plans at national camps and during visits to clubs. Most clubs have been successful at creating plans and requesting various types of support. This support was given wherever possible.	Some clubs had difficulty submitting their activity plans each term, but this was rectified by making invitations to camps and workshops contingent on the submission.
behav a. b. c.	conducts baseline health survey to capture knowledge, attitudes and viour; follow-up survey after 1 year Survey is designed and administered to all clubs Survey data is analyzed Survey data is used to focus programming efforts and to measure changes in knowledge, attitudes and behaviours	Survey was created and conducted with 13 schools.	Survey was analyzed late due to workload of staff and absence of basic statistical package. This package has now been located and the data is currently being analyzed.
	coordinates and facilitates (3) 4-day camps per year for club members and bors to gain knowledge, build skills and network with one another Camp is coordinated and facilitated Club members and advisors increase knowledge, skills, and are able to network with one another	3 national workshops/camps were conducted in 3 regions of Guyana.	
	nakes frequent visits to clubs to show support, share resources, and discuss by plan MoH staff make regular visits to each club Health Club badges are distributed to club members	Each health club was visited at least once per school term and all clubs who submitted badge designs received 50 laminated badges.	It had been difficult for Unit staff to visit with all clubs in the beginning of the year, but with the addition of a Peace Corps Volunteers in July, this challenge was eased.

# Reviewing the goal and objectives of the Health Promoting Schools Initiative:

GOAL: To promote the health and well-being of youth OBJECTIVES:

- 1. A vehicle for health promotion activities is created. ACHIEVED
- 2. Youth have ready access to information resources, resource persons and youth-friendly health services that will influence health promoting behaviours. SOME SUCCESS/ NEEDS MORE DEVELOPMENT
- 3. A strong network is created among youth to reinforce health promoting behaviours, and to foster ideas exchange. ACHIEVED
- 4. Youth are empowered through the cultivation of leadership skills so that they can more easily promote health agendas and messages. *ACHIEVED*
- 5. To encourage a multiplier effect of positive health messages through health club members into the greater school population and the community. *ACHIEVED*

#### LESSONS LEARNED AND PLANS FOR THE FUTURE

Throughout 2004, there were many lessons learned which will help guide the Health Promoting Schools Initiative in the future:

- Clubs need assistance with planning regular activities to keep members' interest engaged
- 2. Clubs need to develop relationships with community partners, Parent Teachers Associations, local authorities, Peace Corps Volunteers, non-governmental organizations and private businesses to access support for their activities
- 3. Clubs need assistance to cultivate their own libraries and resource centres for club members and school-mates to access
- 4. Clubs need to access matching funds for activities
- 5. Regional Representatives need budgets to plan regional activities
- 6. Staff must make regular visits to clubs to monitor clubs' development
- 7. Programs must be created for students graduating from clubs in the health field, ie. internships at health centers
- 8. Clubs need to be linked very closely with nearby health centers

One major outcome of the Health Promoting Schools Initiative has been the linkage of health clubs and health centres. Through focus groups we have found that young

people do not access the health centers near their schools and homes due in part to a traditional orientation of the centers towards maternal and child health. However, in creating relationships with health center staffs during tours of health facilities and health club discussions, young people have become more interested in accessing preventative services and health information, and also in following careers in the health sector. Thus, the intention for 2005, is to more closely link the Health Promoting Schools Initiative with the Youth Friendly health Services Initiative of the unit, and thus health clubs will partner with nearby health centres and advocate for and assist in the delivery of youth friendly health services.

#### THANK YOU TO OUR SUPPORTERS!

At this time, the Child, Adolescent and Young Adult Health and Wellness Unit would like to thank the United Nations Development Program, the United Nations Children's Fund, and the Pan American Health Organization for their generous and unwavering support of the Health Promoting Schools Initiative in 2004. We had a very successful year with lots of youth involvement, skills-building and advocacy. We hope to have an even better 2005 and we hope that we can continue to count on the support of the UN Country Team in Guyana. Thank you!



Please find attached survey, manual and newsletter.