



## Knowledge hub - Collection of best practices

### Summary of the best practice

1. Title of the best practice (e.g. name of policy, programme, project, etc.) \*

Tírala Plena, out of school comprehensive sexuality education - CSE project for young people in humanitarian settings.

2. Country or countries where the practice is implemented \*

Colombia

3. Please select the **most relevant** Action Track(s) the best practice applies to \*

- Action Track 1. Inclusive, equitable, safe, and healthy schools
- Action Track 2. Learning and skills for life, work, and sustainable development
- Action Track 3. Teachers, teaching and the teaching profession
- Action Track 4. Digital learning and transformation
- Action Track 5. Financing of education

#### 4. Implementation lead/partner organization(s) \*

UNFPA, in partnership with the Colombian Institute for Family Welfare (ICBF, for its acronym in Spanish)

#### 5. Key words (5-15 words): Please add key descriptive words around aims, modalities, target groups etc. \*

- Out of school
- Comprehensive sexuality education – CSE
- Young people
- Humanitarian settings
- Migrants
- Families
- Institutional actors
- Early pregnancy
- Gender-based violence GBV

#### 6. What makes it a best practice? \*

The project complements comprehensive sexuality education - CSE that young people do not receive or partially receive in schools, or provides CSE to out-of-school youth. Respond to a current need such as the migratory phenomenon, which is related to the violation of rights and lack of access to key services. In addition, the project is based on a socio-ecological model, which seeks to have a multilevel intervention: young people, their families and institutional actors that guarantee rights.

## **Description of the best practice**

## 7. Introduction (350-400 words)

This section should ideally provide the context of, and justification for, the practice and address the following issues:

- i) Which population was affected?
- ii) What was the problem that needed to be addressed?
- iii) Which approach was taken and what objectives were achieved? \*

"Tírala Plena", a name that was selected by the young people, refers to speaking openly, without lies, that is, speaking in a clear and honest manner.

The participants are young people in a situation of humanitarian crisis: adolescents and young migrants from Venezuela, Colombian returnees and the host population, their families, and the institutional actors (health, education, justice, protection).

The project is implemented in Atlántico, the second non-border department with the highest migratory flow. A considerable increase in early pregnancy was observed, especially in girls between the ages of 10 and 14, an increase in all types of violence inflicted on girls, boys and young people, and an increase in sexually transmitted infections.

The objective is to contribute to the preparation of young people between 14 and 28 years of age, in migration and reception conditions, for the exercise of sexuality as a human right, development of equal social and sexual relations, and protection from gender-based violence.

The specific objectives:

- recognize themselves as subjects of rights capable of making decisions about their bodies in the exercise of sexuality.
- identify the disadvantages of early unions for the exercise of sexuality from the rights approach.
- develop knowledge, attitudes and skills for the prevention and care of gender-based violence.
- increase their ability to ask for help and support in situations that affect their well-being from people and institutions that guarantee their rights.
- recognize their rights, knowledge, attitudes and skills for the care of their sexual and reproductive health.

## 8. Implementation (350-450 words)

Please describe the implementation modalities or processes, where possible in relation to:

- i) What are the main activities carried out?
- ii) When and where the activities were carried out (including the start date and whether it is ongoing)?
- iii) Who were the key implementation actors and collaborators? (civil society organizations, private sector, foundations, coalitions, networks etc.)?
- iv) What were the resources needed (budget and sources) for the implementation?

\*

This project is developed within the framework of the Global ESI extracurricular project, led by UNFPA, with resources from the Government of Norway, and in Colombia, in alliance with the Colombian Institute of Family Welfare (ICBF, for its acronym in Spanish).

The project is implemented in partnership with ICBF, which implements strategies, among other objectives, for the promotion of sexual and reproductive rights and the prevention of early pregnancies. ICBF hires a local implementing partner, who must have the required experience. This implementing partner forms the work team that must meet a profile required by UNFPA. This team, in addition to being in charge of the implementation of the project with young people, their families and local actors, carries out management and advocacy with local governments and civil society organizations to strengthen the guarantee of rights, the effectiveness of care routes and the strengthening of education, health, justice and protection professionals.

The project is structured in three phases: Enlistment, Attention and Closing, during which the following actions are developed:

- Enlistment: identification of the administrative authorities that are involved in the prevention of early pregnancy (health, education, protection, etc.) and actions are coordinated for the comprehensive care of the participants in the project, and future offers that are relevant to the development of program activities.
- Attention: pairs of professionals are formed to facilitate meetings with participating young people, which are held once a week in age groups of 20 beneficiaries according to age.
- Closing: During this stage, young people carry out a self-assessment in a circuit of guiding questions, promote reflection and, in turn, establish the route of goals and life projects.

The project has four lines of action:

- (i) training the exercise of rights and citizenship for young people, through face-to-face meetings, relevant to the moment of the life course, and adjusted to the dynamics of the territory.

This training follows a structure of 4 thematic axes: human rights, basic concepts of sexuality, prevention and protection of gender-based violence, and promotion of sexual and reproductive health.

- (ii) strengthening of 21st-century skills and self-protection mechanisms, which are related to a group of essential skills such as "cognitive flexibility, analysis and evaluation of systems, deductive and inductive reasoning, attitude, intelligence emotional, responsibility, initiative, persuasiveness, tenacity, self-discipline, negotiation, and teamwork" (UNESCO, 2017b).

- (iii) strengthens the capacities of the participating families and community environments with

the purpose of strengthening the relational bonds of mutual care and consolidating community-based prevention strategies.

(iv) knowledge management: a documentation exercise of the experience is carried out, which is aimed at establishing the results and lessons of the development of the process, facilitating accountability, feedback to the territories on the process developed and making informed and evidence-based decisions.

## 9. Results – outputs and outcomes (250-350 words)

To the extent possible, please reply to the questions below:

- i) How was the practice identified as transformative? (e.g., impact on policies, impact on management processes, impact on delivery arrangements or education monitoring, impact on teachers, learners and beneficiary communities etc.);
- ii) What were the concrete results achieved with regard to outputs and outcomes?
- iii) Has an assessment of the practice been carried out? If yes, what were the results? \*

The core elements of the project were included in the operational manual and methodologies of the ICBF (government entity), that is a guide for the entire country.

Formative research was developed that allowed understanding the knowledge, practices, attitudes and imaginaries regarding sexuality and rights, of young people, their families and local actors. This allowed for designing a relevant curriculum with the context and culture.

Transformations of the structure of thought and visibility of the needs of young people, promoting the guarantee of sexual rights and reproductive rights in their municipalities, which is why articulations with educational and health entities, among others that promote the talent of the participants, are an enriching strategy to support their life projects.

Young people, inspired by the transformation and searching for opportunities to transmit a message of equality and prevention of early pregnancy, take the initiative to compose a song under the rap genre, and publish it on social networks.

Self-recognition of the young participants around their beliefs, imaginaries about sexuality as well as their preferences and life motivations.

Improving communication within families.

Systematization of the Tírala Plena project was carried out, as a result of which there is a video found in the Drive folder:

[https://drive.google.com/file/d/1I7047QL0fSO\\_pDjwFnZUdKkolEiu3M5J/view?usp=sharing](https://drive.google.com/file/d/1I7047QL0fSO_pDjwFnZUdKkolEiu3M5J/view?usp=sharing)

With technical advice from WHO, implementation research is underway.

With the vision of implementing other out of school CSE models for those young people most left behind, progress has been made in other actions in parallel:

- In alliance with Profamilia, the Colombian League of Autism and Ashdown, we developed a tool to address CSE with children and young people with disabilities. It can be found here: [https://eiscolumbia.org/documentos\\_pedagogic/descubriendo-la-sexualidad-en-familia/](https://eiscolumbia.org/documentos_pedagogic/descubriendo-la-sexualidad-en-familia/)
- Three rapid assessments were carried out: with young Wayuu indigenous people, with young people from rural areas, and with children and young people with intellectual disabilities. These rapid assessments aimed to understand the knowledge, attitudes and practices around sexuality, sexual and reproductive health and rights, and sexual education.
- Prototyping of three (3) CSE games aimed at families from PDET municipalities (municipalities prioritized by the Peace Agreements), which address issues such as gender equity, sexual and reproductive health, relationships, prevention of teenage pregnancy, and sexual rights and reproductive rights.

## 10. Lessons learnt (300 words)

To the extent possible, please reply to the following questions:

- i) What were the key triggers for transformation?
- ii) What worked really well – what facilitated this?
- iii) What did not work – why did it not work? \*

- The project intentionally promotes the right to participation, and achieves that despite their conditions of psychosocial and environmental vulnerability, adolescents and young people get involved in the process and feel genuinely part of the initiative.
- Group identity, through immaterial and material elements such as a name, logo, song, as well as a t-shirt, cap, or backpack. These types of resources are ways of reaffirming belonging to groups. Carrying an element that identified them and at the same time differentiated them from other groups, made that sense of "belonging" be built.
- The space allocated for the execution of training sessions with young people must be seen as a determining factor in the effectiveness of the program. This is so that the environment must offer a guarantee of confidentiality and, above all, be perceived as comfortable and safe by those who experience the experience.
- The experiences on out of school CSE make sense, making possible the sustainability of these processes, to the extent that the work embraces the institutionality and real processes of articulation are developed in which, not only, collaborations are talked about but also work hand in hand with the territory and its institutions to enhance the impact of these initiatives in the communities.

## 11. Conclusions (250 words)

Please describe why may this intervention be considered a “best practice”. What recommendations can be made for those intending to adopt the documented “best practice” or how can it help people working on the same issue(s)? \*

“Tírala Plena” recognizes a population left behind as young people in humanitarian settings, and it is concerned with understanding their knowledge, beliefs and practices around sexuality and rights in order to build a curriculum that responds to these realities. It has a curriculum that is based on a human rights approach, a gender approach and a pedagogical approach to developing skills, and it is an educational strategy that includes the strengthening of the family, community and institutional context, strengthening the capacities of all the actors involved in the guarantee and promotion of human, sexual and reproductive rights.

Recommendations:

- The team of facilitators must be strengthened in their skills (knowledge, attitudes and skills) to provide CSE from a rights-based approach, based on scientific information and contribute to the strengthening of decision-making skills.
- The team of facilitators must participate in the planning of the project, as well as in meetings prior to each session, in order to discuss, improve and provide feedback on the methodologies; this allows the development of self-critical processes.
- Promote exchange between participants from different groups. The origin of the social activity takes place in the interaction of people on a small scale, that is, face to face in a given situation. The interest of this recommendation lies in the possibility that these exchanges can expand common values and attitudes that later materialize in practices that favour healthy practices of themselves and others.
- This type of strategy must also be designed for adolescent mothers and fathers from the beginning, they must have certain guarantees, such as, for example, the care of their sons and daughters in addition to the need to strengthen other types of issues related to bodily autonomy and life projects.

## 12. Further reading

Please provide a list and URLs of key reference documents for additional information on the “best practice” for those who may be interested in knowing how the results benefited the beneficiary group/s. \*

Video: [https://drive.google.com/file/d/117047QL0fSO\\_pDjwFnZUdKkolEiu3M5J/view?usp=sharing](https://drive.google.com/file/d/117047QL0fSO_pDjwFnZUdKkolEiu3M5J/view?usp=sharing)

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16.Website (URL) of the best practice if any: <https://eiscolumbia.org/tirala-plena/>