

Agency and Resilience - foundational elements of adolescent well-being

Author names and affiliations

- Ajita Vidyarthi, MBA, M.A., Gender Equality Advisor, Plan International Canada, Toronto, Canada.
- Janani Vijayaraghavan, MHS, Health Advisor, Plan International Canada, Toronto, Canada.
- Alana Livesey, M.Sc., Senior Gender Equality Advisor, Plan International Canada, Toronto, Canada.
- Aaliya Bibi, MD, MPH, Senior Health Advisor, Program and Business Development Department, Plan International Canada, Toronto, Canada.
- Chris Armstrong, MPH, Director, Health, Plan International Canada, Toronto, Canada.
- Jumana Haj-Ahmad, M.Sc., Adolescent Development and Participation chief, UNICEF, NY-HQ
- Arushi Singh, Programme Specialist, Section of Health and Education, Division for Peace and Sustainable Development, UNESCO, Paris
- Lesley Gittings, Ph.D Centre for Social Science Research, University of Cape Town, Cape Town, South Africa; Factor-Inwentash Faculty of Social Work, University of Toronto, Toronto, Ontario, Canada
- Lucy Fagan, M.Sc., UN Major Group for Children and Youth, New York; Imperial College NHS Healthcare Trust, London, United Kingdom
- Quirine Lengkeek, M.Sc., Advocacy Coordinator, Choices for Youth and Sexuality, Amsterdam, Netherlands
- Fabio Friscia, Adolescent Development and Participation Manager, UNICEF NY-HQ
- Giovanna Lauro, DPhil, Promundo-US, Washington, DC.
- Deebolena Rakshit, M.A., Research Officer, Promundo-US, Washington DC, USA.
- Bekky Ashmore, SRHR Policy and Advocacy Adviser, Plan International UK
- Danielle Mullings, second year undergraduate student, BSc. Major Software Engineering University of the West Indies, Mona Campus, Jamaica
- Amit Timilsina, MSc., University of Southern Denmark, Esbjerg, Denmark.

Corresponding author

Address correspondence to Chris Armstrong, Plan International Canada
E-mail address: CArmstrong@plancanada.ca

Abstract: Agency and resilience are critical to adolescent well-being. As a domain of the adolescent well-being framework, adolescent agency and resilience are intrinsically linked to a sense of purpose, fulfillment and identity and cuts across all other domains within the adolescent well-being framework. The ability of adolescents to make and act on their choices and meet individual and collective aspirations is essential for their holistic well-being. Adolescents' agency and resilience are influenced by various intersecting socio-structural factors including deep-rooted social and gender norms and unequal power structures, that adversely affect the potential of adolescents. Acknowledging the extent of prevailing inequalities, and that adolescents are not a monolithic group, allows us to explore opportunities to commit to inclusive, gender transformative and adolescent responsive efforts that target adolescent well-being and rights. Several programmatic interventions seek to strengthen adolescents' individual and collective agency, as well as their resilience, by working directly with adolescents, creating an enabling community environment and leveraging the influence and accountability of duty bearers and service providers to strengthen institutional responsiveness to adolescents' well-being needs. These programs consider adolescents' rights, voice and choices, as well as the impact of the social, including the gendered, economic, cultural and political influences in their lives. Currently, there is no universally agreed upon framework or set of indicators or tools for measuring agency and resilience. A significant number of frameworks have been developed and tested in the Global North; however, they require adaptation for multicultural and diverse contexts. Further development of shorter, more youth-friendly, mixed-methods approaches are required, particularly for measurement frameworks which support standardized rights and empowerment-based programming and population-level measurement of participation among adolescents.

Acknowledgements: The authors of the paper thank Dumiso Gatsha for helpful suggestions on a draft of this paper.

Introduction: An important component of the adolescent well-being framework is the domain of agency and resilience that contributes to ensuring all adolescents “have the support, confidence and resources to thrive in contexts of secure, and healthy relationships, realizing their full potential and rights” [1]. In this paper, we explore why agency and resilience is important in the context of adolescent well-being. We provide examples of evidence based programmatic interventions to increase agency and resilience and emphasize the need for a multisectoral gender transformative approach in policies and practice. We also look at synergies with other domains of the well-being framework and give an overview of global measurement frameworks on agency and resilience.

Section 1: The importance of agency and resilience for adolescent well-being

As a domain of the adolescent well-being framework, adolescent agency and resilience is multidimensional, in that it is intrinsically linked to a sense of purpose, fulfillment and identity and cuts across all other domains within the adolescent well-being framework.

Agency can be defined as the capacity to make choices and the power to act on those choices, especially to claim and voice rights [2]. This can be expressed through direct actions or via experiences of choice, decision-making and reflection. Adolescents’ agency is influenced by a range of aspects including: adolescents’ *self-efficacy* (belief in their capacities), *self-esteem* (their overall sense of self-worth), *mattering* (feeling of being important/significant), their experiences of *bodily autonomy* (right to governance over one’s bodies) in an environment free from all forms of *gender-based violence (GBV) and discrimination*, as well as their experiences of *connectedness* (at home, in schools, communities, and through digital and other networks) [3].

Adolescents’ agency also plays a role in shaping their experience of **resilience**, that is their *capacity* to adapt to changes or disruptions that may threaten their stability and well-being. Here, *capacity* can take different forms: anticipatory, absorptive, adaptive, and transformative capacities. Anticipatory capacity is the ability to reduce or avoid the impact of shocks through prior preparation; absorptive capacity is the ability to absorb, cope with and buffer the impacts of shocks; adaptive capacity is the ability to adapt to future risks; and transformative capacity is the capacity to make individual and structural changes to reduce or mitigate the underlying causes of risks [4].

The availability of a safe space to develop and express one’s **self-identity** forms the basis of agency and resilience and the various contributing factors, such as an adolescent’s sense of self-worth and feelings of importance. This is especially important during adolescence, which is a critical phase when strong patterns of attachments with the wider community—particularly with peers—are developed, and the need for greater independence is first experienced. A range of factors influence how an adolescent self-identifies, including their age, religion, ethnicity and sex, their sexual orientation, gender identity and expression (SOGIE), where they live and whether they are disabled. For example, a younger female adolescent may have less confidence to express her identity compared with adolescent boys because of her age, sex, and gender. Self-identity is also affected by ‘positive factors’ that lead to greater agency and resilience, such as positive relationships with family, peers, teachers, mentors, access to knowledge, skills and capacities and enabling environments, such as within schools and communities.

Social identity is constructed by others and can be different from and also impact on the way an individual self-identifies. The social construction of adolescent identities is often underpinned by deep-rooted social and gender norms which adversely affect the potential of adolescents, particularly those most marginalized [3]. Unequal power structures also control or restrict adolescents’ choice and opportunities, including aspects such as their sexuality, mobility, participation and decision-making, and access to and control over resources. For example, harmful social and gender norms around sexual and reproductive health (SRH) services are often perpetuated by family members, including partners and caregivers, and reinforced by local leaders and service providers, due to limited awareness of SRH rights (SRHR). This

can have a particularly negative impact on women and adolescents, including those of diverse SOGIE or from marginalized communities. These individuals can face reduced access to gender and adolescent responsive service delivery, resulting in low self-esteem, limited SRH service utilization and weak resilience to avoid or overcome SRH related “shocks” such as unwanted pregnancy, sexually transmitted infections (STIs), and GBV. During a humanitarian conflict, disaster or even a global pandemic, access to enabling environments (such as schools and health facilities) is further reduced. As a result, there is often a marked decline in adolescents autonomously accessing healthcare services, such as guidance counsellors, SRH services, and primary healthcare providers [5].

Consideration must be given to these socio-structural influences on adolescent agency and resilience and the intersectionality of adolescents’ social and political identities and experiences, such as their age (in relation to the various stages of adolescences), sex, gender, disability, socio-economic status, ethnicity, religion, and education level. Examining social norms and unequal power structures at the individual, community, and institutional levels is an essential prerequisite for creating gender transformative systems and gender equal societies that are responsive to diverse adolescents’ well-being needs. This approach helps shed light on the different socio-structural influences and identities that shape adolescents’ decision-making and their capacities to navigate power in interpersonal relationships, which in turn influences their ability to meet individual and collective aspirations and experience holistic well-being. This is particularly significant for diverse adolescents from marginalized communities, who disproportionately experience structural systems of violence, discrimination and protection risks, in turn sustaining harmful gender norms and values, and perpetuating gender inequalities.

Section 2: Evidence-based programmatic interventions

This section presents good programming strategies that strengthen adolescents’ agency and resilience along with illustrative, evidence-based, evaluated, programmatic examples, chosen based on authors’ experiences. We highlight the importance of adopting gender transformative, multi-dimensional, intersectoral and intersectional approaches, focused on increasing adolescents’ knowledge of their rights and entitlements, strengthening their autonomous and joint decision-making capacities at home, within peer networks and communities, and building equitable gender relationships. The first set of programmatic interventions focus on direct engagement strategies with adolescents to strengthen individual and collective agency and resilience. The second set of interventions look at creating an enabling environment that promotes adolescents’ agency and resilience by working with moral duty bearers, such as community leaders/members, religious and traditional leaders, parents/caregivers. The third set of interventions focus on government/institutions as primary duty bearers and gender and adolescent-responsive laws, policies, and governance systems.

I. Strengthening adolescents’ individual and collective agency and resilience building: This paper identifies three interrelated strategies that seek to strengthen diverse adolescents’ agency and resilience. The strategies emphasize adolescent leadership in the context of individual transformation and community-level change. Various examples have been provided to highlight these strategies, however many of these combine elements of all three strategies. The first strategy is **developing locally contextualized gender transformative programs for adolescents that aim to promote awareness on rights and attitudes, change behaviors and develop skills**. Having an increased understanding of your rights and key information pertaining to various life-skills topics is key for building individual awareness and agency. This information can be provided in group settings, with same-sex facilitators, which creates a safe space for learning, sharing and reflecting with peers, enhancing collective agency and group purpose. One example is Plan International’s **Champions of Change (CoC) for Gender Equality and Girls’ Rights** [6], which is a community-wide strategy for promoting gender equality and social norm change through youth engagement and peer-to-peer mobilization. CoC engages adolescents in all their diversity by implementing locally contextualized gender transformative curricula focusing on empowerment, self-esteem, rights awareness and collective power. It also focuses on dominant masculinities to understand how boys are affected by social norms, and how they can support girls’ rights and gender justice for all. It is a gender segregated and gender synchronized approach taking participants through a reflective journey of change and empowerment. Project evaluations in Uganda, Malawi, and Zambia found participating girls reported increased self-esteem, increased knowledge on

gender equality, confidence to advocate for themselves, and interest in becoming role models in their communities¹. Participating boys reported deeper attitudinal shifts and a willingness to challenge social norms around gendered roles and to act as peer educators. In the Dutch SRHR Alliance's "**Access, Services, Knowledge (ASK)**" program, which aimed to improve the SRHR of young people (10-24 years) by enhancing their individual and collective agency and increasing their uptake of SRH services, increase in youth participation and agency contributed to young people's ability to make positive changes to their own lives, that of others and to processes of social change. Participating young people reported enhancement of skills, understanding of SRHR and exerting their influence through civic engagement.

The second strategy for strengthening adolescents' individual and collective agency entails **conducting intergenerational dialogues and community campaigns that seek to change harmful social norms and unequal power relations and working directly with men and boys to be champions of gender equality**. Intergenerational dialogue is both a method that prompts different generations to learn from each other's perspectives, as well as a strategy to transform unequal power relations and challenge gender norms. To challenge gender norms and positively change behaviour, a collective and joint process of reflection and communication is necessary. In such a process, participants of different ages and sexes are encouraged to listen, ask questions, share experiences, and learn from each other and gain mutual understanding and appreciation of different perspectives. These safe and respectful conversations can contribute to positive relationships between adults and young people that are consistent with gender equality. One example is **Program H**, which engages young men directly in changing inequitable gender norms related to masculinities that perpetuate gender inequality, to promote SRHR and prevent GBV. Developed by Promundo and partners, the curriculum has been adapted and implemented in 36 countries and at times accompanied by its sister version Program M (targeting young women). Findings from 13 Program H impact evaluation studies – including several quasi-experimental studies – that have been carried out in settings ranging from the Balkans to Vietnam have found statistically significant impacts on participants' attitudes and behaviors across several domains related to gender equality [7].

The third strategy includes **providing opportunities for adolescents to design and implement solutions that address their priorities and needs and enable them to lead change within their communities**. Currently in 34 countries, UNICEF's **UPSHIFT** program [8] empowers adolescents and young people to apply their agency and creativity to defining problems and developing solutions through social innovation workshops, mentorship, incubation, seed funding and community dialogues. While it can be integrated into formal, non-formal or other education channels, all UPSHIFT iterations support adolescents and young people, particularly those from marginalized or at-risk groups, to acquire transferable skills to increase their resilience competencies while providing them with opportunities to act as agents of social change, to exercise more proactive citizenship and to influence their surroundings and decision makers. At the community level, this translates into increased engagement of young people, as well as recognition from local authorities and the community at large that young people can be drivers of positive change and innovation.

Although these initiatives have a positive impact on adolescents' individual and collective agency and resilience, there are several limitations. To develop adolescents' agency, adults need to relinquish power, demonstrate trust in young people's abilities and provide them with the capacity and opportunity for independent decision-making. Some intergenerational dialogues are not sufficient in creating the commensurate attitudinal and power shifts that are needed to create an enabling environment for adolescents to exercise their agency. Intergenerational power dynamics, along with cultural norms and values, play a large role in the development of young people's agency through meaningful participation. Nevertheless, while existing evidence points towards an impact on individual attitudes and behaviors, additional evidence is needed to assess the impact on gender norms at the community level. In many initiatives, an in-depth gender, age, and power analysis is not undertaken in advance, resulting in limited

¹ Findings are based on Plan International's qualitative impact assessment of CoC in Uganda (2017), and midline research in Malawi (2018) and Zambia (2019). Findings are based on Plan International's qualitative impact assessment of CoC in Uganda (2017), and midline research in Malawi (2018) and Zambia (2019).

evidence-based programming that is not aligned with the deep-rooted structural issues faced by diverse adolescents. Also, as we engage in scaling up efforts, process implementation studies are needed to understand how to best adapt the intervention's theory of change for easier scalability, and how to ensure quality of facilitation. Sustainability can also be an issue, however, to mitigate this limitation, partnerships with grassroots and local organizations are key to ensure the initiative is relevant, contextual, and easy to adapt and scale up.

II. Creating an enabling environment that promotes adolescents' agency and resilience by working with moral duty bearers: One key strategy in creating an enabling environment that promotes adolescents' agency and resilience is working with moral duty bearers, including parents/caregivers, community leaders/members, and religious and traditional leaders. The examples below specifically highlight working with adolescents and their families to build and strengthen resilience, including economic resilience. The **Productive Social Safety Net Program (PSSN)**, implemented by the Tanzania Social Action Fund (TASAF) [9] uses cash transfers as a strategy to strengthen adolescent, youth and adult well-being with a focus on improving school attendance, participation in household economic activities, material, mental and physical well-being, SRHR and decreasing GBV including sexual exploitation and abuse. The program prioritizes adolescent-focused interventions such as increased financial knowledge and awareness on SRHR to promote sustainable and healthy livelihoods. Recent evaluation [10] confirms a 5% increase in school attendance, 6% increase in literacy levels, increase in material and mental well-being, as well as knowledge of contraceptive use. **Parenting for Lifelong Health (PLH) in South Africa program** [10, 11, 12, 13] is an initiative co-developed by academics, WHO and UNICEF designed to help families build resilience and to get along better, with the goal of reducing child abuse both inside and outside the home. In South Africa, PLH for Adolescents (locally named Sinovuyo Teen) consists of 14 group sessions (complemented by home visits) typically delivered by social service professionals and community-based workers. Sinovuyo used the Rutter/Ungar approach [14] of doing well on a range of key outcomes despite significant adversity. Findings from a large-scale cluster randomized trial showed reductions in child abuse, increases in involved parenting, improvements in mental health, reductions in substance use and improvements in family budgeting and economic outcomes.

Another key strategy for leveraging the power of moral and primary duty bearers/service providers includes **increasing their awareness on gender equality, human rights and adolescents' rights and capacities to empower adolescents with the skills, confidence and services needed to develop their full potential and promote their agency and resilience.** Successful initiatives with duty bearers focus on engaging in learning through doing instead of learning through being told. Joint sessions involve engaging stakeholders on sensitive topics; promoting collaborative learning and mutual respect; and opening opportunities for intergenerational dialogues between adolescents and moral and primary duty bearers to discuss and resolve issues within the community. This increase in knowledge and awareness helps to strengthen positive social norms within communities and among duty bearers. Plan International's multi-country **Strengthening Health Outcomes for Women and Children (SHOW)** program [15] empowered community members including adolescents for enhanced gender-equitable outcomes; and strengthen institutional responsiveness for improved SRH services. In Sokoto state, Nigeria, SHOW engaged religious leaders to promote progressive SRHR messages in their outreach activities and sermons. This was achieved through sensitization meetings, trainings, workshops and the development of technical resource material on Islamic perspectives on gender equality and SRHR, focusing on adolescent health. Close coordination with local governments, civil society members and religious leaders was ensured to co-design content and co-facilitate activities. Qualitative research [16] indicated leaders were encouraged to make changes in personal behaviour and promote progressive messages on SRHR, especially for adolescent girls. Positive changes in the attitudes and practices of community members and adolescents were documented, including regarding uptake of SRH services and adoption of gender equitable behaviour within and outside the home.

Across the above examples, concerns remain about how to combine multiple strategies in a cost-effective manner, avoid time consuming and complex delivery processes, train and support implementation staff or

local volunteers; sustain learning; increase effectiveness; and provide ongoing social support beyond program implementation [12].

III. Strengthening institutional responsiveness for adolescent agency and resilience: This section emphasizes the importance of centering adolescents' voice in governance and accountability mechanisms at all levels. Firstly, strengthening institutional responsiveness requires **advocating for supportive legislative and policy frameworks that guarantee the right of adolescents to participate in all spheres of life and develop to their full potential**. This involves securing political commitment from all relevant sectors, putting in place national laws, and instituting national policies, strategies and action plans with clear roles and responsibilities of different actors, as well as allocating budget for implementation and establishing inclusive accountability mechanisms. UNICEF's **Adolescent civic engagement and agency in local governance program** in Brazil [17] works closely with state and municipal authorities to advance child-centered policies with a focus on strengthening adolescents' capacities and pathways to claim and exercise their rights to participate in local governance, and to increase policy effectiveness for advancing adolescent development. The Adolescent Citizen Group, policymakers, and the Municipal Council for the Rights of Children and Adolescents collaborate on the Municipal Action Plan and on other relevant policies and programs in their communities related to child and adolescent rights. Additionally, adolescents are engaged in 'thematic challenges' where they learn about their rights, mobilize their peers and communities and establish a dialogue with public policy managers. This program has strengthened transparency in municipal investments in public policies for young people; improved public policies, including legislation that has helped to reduce school drop-out rates; lowered prevalence of adolescent pregnancy; improved access to opportunities for adolescents to go back to school and to professional and life skills training; and addressed community issues, such as discussions on STIs and HIV.

A further strategy includes **influencing public financing, including budget allocations to implement laws, policies and programs that strengthen adolescent agency and resilience**. A gender-responsive budget is a budget that works for everyone (women, men, girls, boys, in all their diversity) by ensuring gender-equitable distribution of resources and by contributing to equal opportunities for all [18]. For example, in Tanzania, Save the Children worked with 900 children's councils in seven districts, supporting them to review district council plans and budgets and make recommendations [19]. As a result, budgetary allocations in six out of seven districts were amended in some form. In Arusha and Same districts, 455,000 students benefitted from feeding programs resulting in an increase in school attendance from 70% to 84% in Same district. In Ruangwa, 52 additional teachers were recruited. Platforms for students to periodically provide feedback to local plans were institutionalized, contributing to sustaining change.

Finally, **strengthening accountability mechanisms** that meaningfully engage adolescents in the design, implementation and monitoring of policies and programs at the municipal, provincial, and national levels strengthens adolescents "abilities to meet their own needs, prevents and reduces vulnerabilities, [and] promotes ownership and sustainability of interventions" [20], which directly impacts their agency and resilience. For example, in Malawi, CARE used Community Score Cards (CSC) to "engage adolescents in the planning, monitoring, and evaluation of service delivery and in enacting desired change within their own communities" [21]. Adolescents are given a forum to raise their concerns and challenges in accessing SRH services, and develop measurable indicators that are verified and scored, to create a Score Card. The results of the Score Cards are used to engage adolescents and communities in discussions to find possible solutions, which are "jointly implemented and monitored by young people, service providers and the wider community" [21], and to monitor progress of the selected indicators to hold duty bearers to account in enacting change.

The above examples demonstrate that while formal entry points, laws, and policies for adolescent engagement in governance are valuable, these remain insufficient on their own, to guarantee that adolescents' perspectives influence decisions that secure their rights to provision, protection and participation. Meaningful civic engagement requires attention to overcoming barriers linked to societal norms that systemically deny marginalized voices. Strategies found critical for successful elimination of

barriers include creating accountable, formalized governance systems; building on existing community relationships; prioritizing inclusion; listening to adolescents through formal and non-formal channels; and building adolescents' active civic education.

Section 3: Links with other domains of the adolescent well-being framework

This section explores the role agency and resilience plays in the other domains of the adolescent well-being framework. These links have been mentioned in the examples above and are detailed further below.

Good health and nutrition: Relationships between *health and nutrition* and *agency and resilience* are bi-directional. Adolescent health experiences of malnutrition and illness, health systems and prevailing social, including gendered, and physical environments have a direct impact on their agency and resilience. Conversely, agency and resilience have also been shown to affect adolescent health outcomes [22,23]. Several of the programmatic examples above (SHOW, PLH, Program H) illustrate that building the agency and resilience of adolescents, particularly girls, and enabling them to make choices and act on those choices leads to positive health and nutrition outcomes. As an additional example, adolescent HIV research and programming is increasingly implementing combinations of social protections (e.g., cash transfers, positive parenting and violence prevention programs) as well as biomedical and behavioural interventions (e.g., SRH service provision including HIV testing and treatment, condom provision and family planning counselling) with the dual goal to achieve improved health outcomes by strengthening adolescent girls' agency and resilience as well as creating opportunities for adolescents to experience greater power, control, self-esteem and self-confidence by strengthening responsiveness of health services (PEPFAR Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) initiative) [24].

Connectedness, positive values and contribution to society: A key link between the domains of *connectedness, positive values and contribution to society* and *agency and resilience* is recognition of adolescents' personal and social relationships being a central determinant of adolescent well-being. This includes interpersonal relationships with family, partners, friends, teachers and colleagues, as well as collective dimensions, shaped by a shared identity (age, SOGIE, class, gender, disability, religion etc) and common experiences. As demonstrated in the examples above, programs focused on building adolescents' agency and resilience typically leverage adolescents' existing relationships and connections at the family, community and institutional levels, as a starting point. Towards this, caregivers, community gatekeepers, moral and primary duty bearers, service providers, civil society, youth groups and other influencers are typically engaged to create an enabling environment for increasing adolescents' knowledge, life-skills, financial and social capital and capacities to make and act on decisions (agency) as well as adapt to disruptions or shocks (resilience).

Safety and Supportive Environment: Underlying social, including gendered, political and economic drivers are key determinants to understanding the relationship between agency and resilience and a safe and supportive environment [25]. Such drivers include family/social values and norms, socio-economic position, social interaction, identity, sense of autonomy, social protection, adolescent driven programs and strategies, law and policy and disability friendly infrastructures. To ensure a safe and supportive environment for adolescents, safe policy environments, resilient health and social systems, strong safety nets, meaningful engagement of adolescents in decision making at all levels and processes and sustainable community partnerships must be prioritized [25, 26,27]. These interventions help to tackle those socio-political and economic drivers that positively affect adolescents' agency and resilience, as well as contribute to the improved overall well-being of adolescents through a safe and supportive environment. Adolescents' sense of control over their own lives is important in creating a supportive environment and it is possible only when they have the capacity and feel safe to do so [28]. For example, various programs capacitate adolescents to advocate for creating safe and supportive environments at home, school or in their community. Adolescents can lobby local government and other stakeholders, which can contribute to progressive policy, mechanisms and facilities. Thus, adolescent agency and resilience is affected by but can also contribute to developing a safe and supportive environment.

Learning, competence, education, skills and employability: Adolescents face unique emotional, social, physical challenges and risks, and require adequate protective factors in place, so that they may build resilience and exert agency. Risk factors, such as lack of parental involvement, bullying, violence, or low self-esteem/self-image, can impact adolescents' cognitive, social and emotional development, and negatively affect learning, competence and educational achievement. As with health and nutrition, there is a two-way link between education and agency and resilience. Education is a protective factor that helps cultivate skills to enhance agency and resilience [29]. Personal growth competencies, such as agency and resilience [30], are essential for learner well-being and are useful later in life for employment and social well-being. Curriculum based interventions² like comprehensive sexuality education, social and emotional learning programs, or violence prevention programs contribute to resilience and agency by building social, emotional and health skills [31]. To enable learners' agency, educators need to understand and interact with the socio-ecological model around individual learners. A personalized learning environment, i.e., one that supports and motivates each learner in pursuing their own passions through the learning process, as well as working together with other learners, along with a solid foundation of literacy and numeracy, remain crucial to this process [32]. A curriculum-based approach, positioned within a whole school approach, towards building learner agency and resilience motivates learners, while recognizing their existing knowledge, skills and values, as seen in the examples above [32]. It also ensures that agency and resilience is not only dependent on the individual, but also supported through the other ecological layers around the adolescent.

Section 4: Measuring agency and resilience

Based on a rapid review of select studies, this section presents a brief overview of challenges of existing measurement frameworks on agency and resilience. Where applicable, information is included on whether the indicators used in the select frameworks are subjective or objective, whether self-reported or proxy measures are used and whether indicators are applicable for measurement of individual agency and resilience and/or for monitoring programs.

Currently, there is no universally agreed upon framework nor a set of indicators or tools for measurement of agency and resilience, and various studies have highlighted the multiple challenges in accurately measuring agency and resilience [33, 34, 35, 36, 37, 38]. In addition, several frameworks have been developed and tested in the Global North and, as a result, face challenges associated with adaptation when applied to multicultural and diverse contexts in the Global South, such as those encountered in the validation of the *Developmental Assets Profile* [39]. The frameworks also face the challenge of giving rise to barriers unique to certain groups of people based on their respective socio-cultural identity characteristics and histories. According to Gardner et al [35] these challenges underscore the need to have a framework which is shown to be valid and reliable within diverse cultural contexts, while remaining adaptable to important variances in the ways in which agency and resilience, and their numerous sub-domains, are conceptualized in language and observed in behaviour. Finally, to reliably measure the many domains of agency and resilience, existing tools are often quantitative and lengthy.

Individual organizations have developed measurement frameworks to support standardized rights and empowerment-based programming. For example, Plan International Canada's Women and Girls' Empowerment Index (WGEI) [40] was developed in 2018 to measure the impact of gender transformative programming, focused on increasing agency and resilience of marginalized groups and strengthening governance systems for improved rights-based outcomes. The WGEI is designed as a composite measure that aggregates, ranks and summarizes multiple indicators or data points to capture changes directly associated with the root causes of gender inequality across five domains: roles and responsibilities, resource access and control, participation and decision making, social norms and institutional change. The WGEI triangulates data from youth, moral duty bearers and primary duty bearers in its composite measure and has been piloted in Ethiopia, Bolivia, Peru and Bangladesh. The Guttmacher Institute's Adolescents' Information, Services, Agency and Rights (AISAR) index [41] seeks

² See Domain 4 paper

to assess the state of adolescent girls' reproductive health and rights by combining 16 indicators into an index measuring four dimensions of adolescent girl's SRHR. It examines adolescents' access to information and services, agency in sexual activity and health, and perceptions of rights within marriage. The index was tested using data from 30 countries with recent nationally representative surveys distributed across four regions. UNICEF is currently developing global indicators and questionnaires for population-level measurement of participation among adolescents (ages 10 to 19). The conceptual framework upon which this work is designed includes the domains of self-esteem, self-efficacy, connectedness, mattering, civic skills, and decision-making.

Conclusion: This paper highlights the importance of agency and resilience on adolescent well-being, as well as the impact of socio-structural influences, including deep-rooted social and gender norms and unequal power structures. Building adolescent agency and resilience requires adopting gender transformative, multidimensional, intersectoral and intersectional approaches that focus on adolescents' rights, voice and choice all the while considering the impact of the social, economic, cultural and political influences in their lives. The program examples in this paper showed the value of designing locally contextualized gender transformative interventions for adolescents' empowerment, strengthening individual, social and financial capital, supporting transformation of gender norms and centering adolescent engagement and leadership in all levels of governance processes. Programs need to continue to invest in building individual and collective agency and resilience, whilst recognizing adolescents as capable actors who can lead/co-lead initiatives. Programs should also create scope to shift power and support resilience and well-being across domains of the adolescent well-being framework. In order to see measurable changes in adolescents' agency and resilience, measurement frameworks, tools and indicators that go beyond proxy indicators to actual measurement of agency and empowerment need to continue to be refined, tested broadly and adapted to diverse contexts, in order to improve monitoring of adolescent well-being.

References:

1. Ross DA, Hinton R, Melles-Brewer M et al. Adolescent Well-Being: A Definition and Conceptual Framework. *J Adolesc Health*. 2020 Oct; 67(4): 472–476. doi: [10.1016/j.jadohealth.2020.06.042](https://doi.org/10.1016/j.jadohealth.2020.06.042)
2. Naila Kabeer (1999), Resources, Agency, Achievements: Reflections on the Measurement of Women's Empowerment. <https://www.utoronto.ca/~kmacd/IDSC10/Readings/research%20design/empowerment.pdf>
3. Chelsea L. Ricker & Rebekah Ashmore (2020) The importance of power and agency in a universal health coverage agenda for adolescent girls, *Sexual and Reproductive Health Matters*, 28:2, 1787312, DOI: 10.1080/26410397.2020.1787312
4. Plan International 2020. Pathways to resilience: Plan International's resilience framework Annex 1 Glossary. Accessed at <https://plan-international.org/publications/pathways-resilience>
5. Guttmacher Institute, From Bad to Worse: The COVID-19 Pandemic Risks Further Undermining Adolescents' Sexual and Reproductive Health and Rights in Many Countries. Policy analysis, New York: Guttmacher Institute 2020, <https://www.guttmacher.org/article/2020/08/bad-worse-covid-19-pandemic-risks-further-undermining-adolescents-sexual-and>
6. Plan International. Champions of Change for Gender Equality and Girls' Rights: <https://plan-international.org/youth-activism/champions-change>
7. Promundo 2010. Program H and Program M: Engaging young men and empowering young women to promote gender equality and health. <https://promundoglobal.org/wp-content/uploads/2014/12/Program-H-and-Program-M-Evaluation.pdf>
8. UNICEF UPSHIFT. Accessed Mar 2021 <https://www.unicef.org/innovation/upshift>
9. The Transfer Project. Tanzania's Productive Social Safety Net Programme (PSSN) and its impacts on youth. Research Brief 07. The Transfer Project 2018. Accessed Mar 2021 https://transfer.cpc.unc.edu/wp-content/uploads/2018/09/Tanzanias-Productive-Social-Safety-Net-Programme-PSSN-and-Its-Impacts-On-Youth_Sept-2018.pdf
10. Parenting for Lifelong Health – the Sinovuyo Teen Program, Department of Social Policy and Intervention <https://www.spi.ox.ac.uk/parenting-lifelong-health-sinovuyo-teen-program>
11. Sinovuyo Teen parenting programme research toolkit <https://www.unicef-irc.org/research-family-and-parenting/?article=1787>

12. Cluver L, Hodes R, Sherr L, Orkin FM, Meinck F, Lim Plak, et al. Social protection: potential for improving HIV outcomes among adolescents. *J Int AIDS Soc.* 2015;18(Suppl 6):202607
13. Doubt, Jenny; Loening-Voysey, Heidi; Cluver, Lucie; et al (2018). "It empowers to attend." Understanding how participants in the Eastern Cape of South Africa experienced a parent support programme: A qualitative study, *Innocenti Working Papers* no. 2018-14, UNICEF Office of Research - Innocenti, Florence
14. Ungar, M. The Social Ecology of Resilience: Addressing Contextual and Cultural Ambiguity of a Nascent Construct. *American Journal of Orthopsychiatry* 2011 American Orthopsychiatric Association 2011, Vol. 81, No. 1, 1–17
15. Plan International. Strengthening Health Outcomes for women and Children (SHOW): <https://plancanada.ca/show>
16. Promundo. Engaging Religious Leaders in Reducing Maternal and Child Mortality, and Gender Equality Field Experiences from the SHOW Project in Sokoto State, Nigeria. Promundo 2019.
17. Advancing Child-Centred Public Policy in Brazil through Adolescent Civic Engagement in Local Governance. October 2020. Accessed Mar 2021. <https://www.unicef.org/media/90726/file/2020-Adolescent-Engagement-Programming-in-Brazil-Case-Study.pdf>
18. Oxfam (2018). A Guide To Gender-Responsive Budgeting. <https://policy-practice.oxfam.org/resources/rough-guide-to-gender-responsive-budgeting-620429/#:~:text=A%20gender%2Dresponsive%20budget%20is,justice%20and%20for%20fiscal%20justice>
19. Davis A, Bergh G, Lundy A. (2014). Young people's engagement in strengthening accountability for the post-2015 agenda. Overseas Development Institute.
20. Students Partnership Worldwide, DFID-CSO Youth Working Group. Youth participation in development: a guide for development agencies and policy makers. 2010, p. 6, available at <http://restlessdevelopment.org/file/youth-participation-in-development-pdf>
21. The Coalition for Adolescent Girls. Partners and allies: Toolkit for meaningful adolescent girl engagement. 2015, p. 20 available at http://coalitionforadolescentgirls.org/wp-content/uploads/2015/12/CAGPartnersandAlliesToolKit_10.compressed.pdf
22. Skovdal M, Ogutu VO. Coping with hardship through friendship: the importance of peer social capital among children affected by HIV in Kenya. *African J AIDS Res.* 2012;11(3):241–50.
23. Cohen O, Mahagna A, Shamia A, Slobodin O. Health-Care Services as a Platform for Building Community Resilience among Minority Communities: An Israeli Pilot Study during the COVID-19 Outbreak. *Int J Env Res Public Heal.* 2020;17(20):7523.
24. Saul J, Bachman G, Allen S, Toiv NF, Cooney C, Beamon T. The DREAMS core package of interventions: A comprehensive approach to preventing HIV among adolescent girls and young women. *PLoS One.* 2018;13(12).
25. World Health Organization. Health 2020 Priority Area Four: Creating Supportive Environments and Resilient Communities. World Health Organization. 2018.
26. Luthar SS, Cicchetti D. The construct of resilience: Implications for interventions and social policies. *Development and psychopathology.* 2000;12(4):857.
27. Kaplan CP, Turner S, Norman E, Stillson K. Promoting resilience strategies: A modified consultation model. *Children & Schools.* 1996 Jul 1;18(3):158-68.
28. Whitehead M, Orton L, Pennington A, Nayak S, King A, Petticrew M, Sowden A, White M. Is control in the living environment important for health and wellbeing, and what are the implications for public health interventions? Final Report.
29. Saleem, A., Mevawala, A.S. (2019). Resilience among Adolescents: A Concept, Construct, Process, Outcomes and Nurses' Role, *i-manager's Journal on Nursing* 9(1),32-38. <https://doi.org/10.26634/jnur.9.1.16078>
30. Lambert, P. (2017). Hard focus on "soft" skills, *Education: Future Frontiers Background Paper*, NSW Department of Education
31. Cahill, H., Davdand, B., Walter-Cruickshank, E., & Shlezinger, K. (2019). An Integrated Approach to Educating for Social and Emotional Learning, *Gender Education and Comprehensive Sexuality Education*. Melbourne: Youth Research Centre
32. OECD. (2018). The Future of Education and Skills: Education 2030.

33. Schmidt, C. J. (2018) Examining the role of interpersonal and societal mattering in the health and wellbeing of rural adolescents. *Journal of Career Assessment*
34. DuBois, D. L., Felner, R. D., Brand, S., Phillips, R. S. C., & Lease, A. M. (1996). Early adolescent self-esteem: A developmental-ecological framework and assessment strategy. *Journal of Research on Adolescence*
35. Gardner, Williams, Guerra and Walker (2011) The Jamaica Youth Survey: Assessing Core Competences and Risk for Aggression among Jamaican Youths. University of Delaware
36. Karcher, M. J., & Lee, Y. (2002) Connectedness among Taiwanese middle school students: A validation study of the Hemingway Measure of Adolescent Connectedness. *Asia Pacific Education Review*, 3(1), 92.
37. Campbell, D. T., & Fiske, D. W. (1959). Convergent and discriminant validation by the multi-trait, multi-method matrix. *Psychological Bulletin*, 56(2), 81-105.
38. Olenik C, Zdrojewski N, Bhattacharya S. Scan and Review of Youth Development Measurement Tools. USAID, December 2013.
39. Scales PC. Youth Development Assets in Global Perspective: Results from International Adaptations of the Developmental Assets Profile. *Child Ind Res*. 2011; 4: 619-645.
40. Plan International Canada's architecture for gender transformative programming and measurement: a primer. Accessed Mar 2021. https://plancanada.ca/file/planv4_files/reports/Gender-Transformative-Programming-and-Measurement-Architecture_Oct2020.pdf
41. Anderson R et al., *Measuring Adolescent Women's Sexual and Reproductive Health Within a Rights-Based Framework: Developing and Applying an Index*, New York: Guttmacher Institute, 2014. https://www.guttmacher.org/sites/default/files/report_pdf/aisar.pdf