

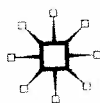
AFRICAN CHILDHOODS

EDUCATION, DEVELOPMENT,
PEACEBUILDING, AND THE
YOUNGEST CONTINENT

Edited by

Marisa O. Ensor

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AFRICAN CHILDHOODS

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CHAPTER 13

OUR VOICE: PUBLIC HEALTH AND YOUTHS' COMMUNICATION FOR SOCIAL CHANGE IN SENEGAL

Laurel J. Felt and Alexandre Rideau

Introduction

Twenty-one-year-old Assane Diop ("Azoupy" to his friends) describes himself according to his loves—for his parents, for his friends, and for making things, especially video projects. During summer 2010, Azoupy posted his latest creation to YouTube: a factually accurate, youth-oriented, mobile phone recorded video on reproductive health. The significance of this feat transcends the personal, although such engagement with digital production and distribution certainly increases Azoupy's odds of becoming the "great computer graphics designer" he dreams of being. In fact, Azoupy's participation in this reproductive health (RH) conversation has important implications for public health management in Azoupy's native country of Senegal, the greater sub-Saharan Africa region, and throughout the world.

What are the links between public health, RH, and youths' meaningful communication? How, if at all, are public health and RH impacted by expanding opportunities for young people to develop and apply communication skills? First, this chapter reviews the Senegalese contexts of health and youth communication. Next, it explores a series of studies conducted by the Senegalese nongovernmental organization (NGO) le Réseau Africain d'Education pour la Santé (RAES; African Network for Health Education). Finally, it discusses various implications and recommendations for public health practitioners, policy makers, educators, and youths seeking to have their voices heard.

Reproductive Health Challenges in Senegal

For Senegal, a sub-Saharan developing democracy of 13 million people, RH-related challenges pose a threat to the well-being of its citizens and

jeopardize its overall public health. More than two-thirds of the population have never engaged in protected sex, approximately 90% of women do not use modern contraceptives, and approximately 90% of men and women of childbearing age have never been tested for HIV/AIDS (Ndiaye and Ayad 2005). This means that most Senegalese are vulnerable to sexually transmitted infections (STIs), including HIV/AIDS.

Over the past few decades, HIV/AIDS has drawn the bulk of the West's public-health oriented attention and aid. Some could argue, this is for good reason. Since sub-Saharan Africa is home to approximately 67% of the world's HIV/AIDS patients but only 10% of the world's population, HIV/AIDS affects this region disproportionately (UNAIDS 2010). But exclusively focusing on HIV/AIDS is an inadequate strategy for improving RH, both in Senegal and across the region.

First, in Senegal's case, HIV/AIDS is not the predominant RH concern. The incidence of HIV/AIDS in Senegal is inferior to that of some of its sub-Saharan neighbors, amounting to approximately 1% among 15- to 49-year-olds (UNICEF 2010). More pressing RH concerns include the widespread prevalence of early marriage,¹ which contributes to childbirth-related complications and fatalities, and helps to cement Senegal's maternal and infant mortality rates as among the highest in the world.² Other concerns include skyrocketing reports of sexual violence against minors and the widespread practice of female genital mutilation, affecting at least one quarter of Senegal's adolescent girls (Ndiaye and Ayad 2005). Second, HIV/AIDS is not isolated from other RH concerns; rather, these conditions are often intricately entangled, as one RH issue facilitates the rise of another, for example, in mother-to-child transmission of HIV/AIDS. Third, in Senegal and across the region, HIV/AIDS and other RH issues emerge from a common context of intolerant attitudes and poor access to sexual education and communication opportunities, as exemplified in a 2005 Senegalese national survey in which 78% of youths aged 15 to 24 incorrectly identified means of HIV prevention and embraced major misconceptions about transmission (UNAIDS 2008). As RH wanes, the nation's public health suffers.

To stem the tide of HIV/AIDS and boost overall wellness, both RH holistically and factors challenging RH specifically should be addressed. Youths in Senegal represent the ideal population for such an intervention because attempting to impact perspectives and practices before sexual risks have been encountered or habits have been established is both the most efficient and most moral course of action. In Senegal, young people represent a significant segment of the population; everywhere, young people boast various qualities that predict their effectiveness as educators and community leaders (Kretzmann and McKnight 1993, 30-31).

Why Senegal? Nations that have been massively stricken by HIV/AIDS are encumbered by its management. Senegal's modest infection rate allows it space to experiment with innovative approaches to RH. Senegal's stable democracy and free media also facilitate innovation. As Europe's example shows, consistent, innovative HIV/AIDS education is necessary in order to keep prevalence rates low³ (Centre Régional d'Information et de Prévention du SIDA 2004). Senegal's

location is also key, since its proximity and ethnic similarity to other developing nations demonstrate that RH breakthroughs are possible.

Communication Challenges for Senegalese Youths

In Senegal, RH issues coexist and often intersect with communication-related challenges, especially when it comes to youths. Although 68% of Senegal's population is under 25 years (Canadian International Development Agency 2011),⁴ elders' underestimation of youths' potential, young people's lack of robust communication skills, and society's lack of contexts for expression limits the solicitation and sharing of youths' perspectives. Modest access to digital media and related skills also circumscribes the potential impact of youths' voices. Since the right to self-expression is often viewed as inalienable, and the right to information was articulated by the 1994 United Nations International Conference on Population and Development, these communication challenges demand attention.

West African traditional wisdom contends that elders know better than their youthful counterparts. However, now that youths number so greatly, minimization of their legitimacy invalidates the views of the majority of society. It also fails to tap the nation's rich energy reserves, not embodied in oil or diamonds, but in youths themselves (International Youth Foundation 2011). Developmentally, adolescents are poised to learn dynamically, experiment innovatively, and work passionately for causes in which they believe (Erikson 1959). Since such activity is required for twenty-first century development (Thomas and Seely Brown 2011), youths' energy may uplift any nation seeking to harness it.

As a case in point, youths have proven to be quite effective as peer educators, particularly in RH and public health (FHI 2010; Adamchak 2006). When youths see their peer educators as similar or attractive models, their behaviors are influential. These behaviors may deliver social proof (Sherif 1935), boosting onlookers' sense that they can appropriately and successfully perform the modeled behaviors. Students' sense of social and subjective norms (McGuire 2001), or their perception of the acceptability and prevalence of certain behaviors may shift. Their sense of self-efficacy (Bandura 1977), that is, their belief in their capacity to produce effects, may skyrocket. They may even develop a stronger sense of collective efficacy, defined as "the degree to which individuals in a system believe that they can organize and execute courses of action required to achieve collective goals" (Papa et al. 2000, 36).

Robust communicators understand how audiences accept, refuse, reframe, and answer messages (Wolton 2009), and can craft effective messages across multiple modes. To acquire robust communication skills, individuals require the tools and opportunities for practicing various forms of expression (e.g., spoken, written, nonverbal, multimedia); they also must understand their own objectives and others' orientations. By and large, Senegalese youths lack access to these tools and opportunities.

First, Senegalese formal education is often inadequate. In 2009, only 41.4% of 11- to 13-year-olds were enrolled in school (African Economic Outlook 2011), and teen enrollment rates diminish further with age. Perhaps unsurprisingly, just

half of all youths aged 15 to 24 are literate (Sow 2000).⁵ The more sophisticated skills of analyzing texts and constructing arguments based on reliable evidence, therefore, are beyond the reach of most youths. Second, digital opportunities and skills are not ubiquitous. While the International Youth Foundation (2011) found that 47% of 12- to 30-year-olds go online once a week, this rate still lags behind international peers.⁶ Additionally, the quality or depth of Senegalese youths' online experiences may be limited (Paulot 2009). This is an important distinction. The digital divide refers to ownership of tangible products (e.g., computers, modems), whereas the "participation gap" refers to "unequal access to the opportunities, experiences, skills, and knowledge that will prepare youth for full participation in the world of tomorrow" (Jenkins et al. 2006, 3).

Certainly, a deeper familiarity with new media literacies (NMLs), described as "a set of cultural competencies and social skills that young people need in the new media landscape" (Jenkins et al. 2006, 6), would enrich youths' digital negotiation. The 12 NML skills are play, performance, simulation, appropriation, multitasking, distributed cognition, collective intelligence, judgment, transmedia navigation, networking, negotiation, and visualization. While the demands of new technologies have made NMLs an increasingly vital skill set, NMLs are neither new nor technology-dependent; rather, they are problem-solving tools. New and old media alike pose "problems," such as understanding new gadgets, working with dissimilar collaborators, and interpreting data. NMLs—in these examples, play, negotiation, and visualization, respectively—offer tools for solving those problems.

Third, divisive social norms and customs often restrict youths' knowledge of others. While multiethnic Senegal deserves credit for its legacy of internal peace, factors such as geography, language, and tradition still challenge its people's demystification of one another. Effective communicators need to understand their communication partners—who they are and how they are likely to interpret information—to craft accessible, comprehensible messages (Escarpit 1995).

Effective communicators also need to understand and believe in themselves, which boosts their ability to speak and listen with integrity. Training in social and emotional learning skills (SELs) would address these issues. Self-awareness, self-regulation, social awareness, relationship skills, and responsible decision making constitute SEL's five core competency groups (Elias et al. 1997). Enrichment in these areas delivers the prerequisites for effective communication and creates the conditions for meaningful learning (Durlak et al. 2011; Zins et al. 2004).

Finally, there are few contexts in which Senegalese youths can freely gather, negotiate, or air their perspectives en masse.⁷ While religious or cultural rites may motivate elders to assemble groups of youngsters, the degree to which youths can organize themselves or challenge the status quo within these controlled assemblies is limited. Such lack of unregulated space for youths means a lost opportunity for development. Community participation can boost youths' cognitive, emotional, and interpersonal skills (Langhout and Thomas 2010; Wong, Zimmerman, and Parker 2010); upending dysfunctional systems and embracing civic responsibility can enrich citizenship understandings.⁸

Current Investigation

Based in Senegal's capital city of Dakar, RAES supports innovative applications of information and communication technology (ICT) to strengthen health and education programs. This mission is founded on the following principles: community ownership; empowerment of horizontal communication; recognition of community members as agents of change; and emphasis on issues of meaning to the community (Frizelle et al. 2009).

RAES⁹ developed Sunukaddu,¹⁰ an in-school and after-school program for 15- to 25-year-olds that delivers "improvement in the response to HIV/AIDS." Sunukaddu was designed (and redesigned over its three-year tenure) to be

- information-rich, supporting youths' opportunities to access credible facts from original sources and internalize the significance of human rights violations;
- communication-oriented, supporting youths' expression and dialogue;
- multimodal, incorporating online, mobile telephone, and analog components; and
- skills-based, focusing on ICT proficiency, NMLs, and SELs.

Since its debut in 2008, Sunukaddu has conducted three major initiatives: Sunukaddu 1.0, Campagne Sunukaddu, and Sunukaddu 2.0.

Study 1: Sunukaddu 1.0

Sunukaddu 1.0 consisted of a 10-week workshop for high-school-aged leaders; creation and implementation of Sunukaddu-inspired clubs at three high schools, complemented by ongoing training and monitoring from RAES; and a repeated cross-section assessment of students at four Dakar high schools. Workshop participants learned about: human rights and HIV/AIDS; stigma, discrimination, and voluntary testing¹¹; and production of digital content. The young participants created multimedia pieces on HIV/AIDS and uploaded them to a website, www.sunukaddu.com (Massey et al. 2009). Workshop graduates recruited peers to join school-based Sunukaddu clubs.

Summer 2008 workshop members (n=45, mean age=17.4 years, males=27, females=18) completed surveys before and after their 10-week training period. Data were collected at baseline in 2008 from 10th grade students from the three intervention high schools (Blaise Diagne, n=608; Parcelles Assainies, n=833; Sacre-Coeur, n=335), and a demographically similar control school (Rufisque, n=400). At follow-up in 2010, a cross-sectional survey design was implemented at each of the four schools, sampling students in the 11th and 12th grades¹² (Blaise Diagne, n=819; Parcelles Assainies, n=598; Sacre-Coeur, n=420; Rufisque, n=523; for a review, see Massey et al. 2011). Three structured focus groups of 10 to 12 individuals were held at each high school in 2008, and one focus group per school was convened in 2010 (Camara et al. 2010).

Study 2: Campagne Sunukaddu

Campagne Sunukaddu invited all Senegalese 15- to 25-year-olds to combat HIV/AIDS stigma by creating consciousness-raising multimedia messages. Campagne Sunukaddu offered prizes¹³ to media-makers in eight categories: video, audio, photography, text messaging, screenplay, drawing or poster design, and song. Notably, Campagne Sunukaddu also pledged to use the winning youth-created pieces as the cornerstone of regional and national public health campaigns. A jury of media production and public health professionals judged the entries during winter 2010; the First Lady of Senegal presided over the awards ceremony.

RAES internally tracked its receipt of contest entries and dissemination of campaign materials. Independent evaluators audited RAES's records and submitted a comprehensive report (Camara et al. 2010).

Study 3: Sunukaddu 2.0

Sunukaddu 2.0 revisited the initial summer workshop concept but adjusted its staffing, participant population, schedule, materials, and pedagogy. First, Sunukaddu staff participated in a three-week professional development workshop, constructing a unified vision and writing curriculum as a team. Then, participants convened twice a week over six weeks. The curriculum shifted from teaching youths about HIV/AIDS and specific technology products to encouraging youths to go online for information, learn within the context of production, pose questions to visiting experts, and create with smartphones. Instructors also supported participants' familiarity with ICT and acquisition of versatile, communication-related skills (e.g., NMLs and SELs).

Sunukaddu 2.0 (n=22) involved two groups of participants. One group (n=8, mean age=20 years, males=6, females=2) consisted of members of one high school's English language club.¹⁴ Azoupy was a member of the second group (n=14, mean age=19.2 years, males=7, females=7), which consisted of youths recruited informally; none knew who all the members of the group were in advance. One of this group's members had graduated from high school, two had left school prior to graduation, and the remaining 11 were still enrolled in high school. Questionnaires were administered to Sunukaddu 2.0 participants pre- and postintervention. During the last week of the workshop, participants identified the NMLs and SELs in which they believed they had achieved expertise. Less than a week after the workshop concluded, a member of RAES's administrative staff conducted three semistructured focus group interviews with same-sex participants (Group A: n=7 males; Group B: n=6 males; Group C: n=9 females).

Results

Collectively, Sunukaddu's three efforts successfully achieved the program's broad objectives: to impact youths' knowledge of voluntary testing and human rights considerations; to support youths' production of youth-oriented, multimedia, public health messages; to facilitate youths' participation in public health

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conversations; and to guide youths' skill mastery in terms of ICT, NMLs, and SELs (see Table 13.1).

Not only did youths' knowledge of voluntary testing sites and human rights considerations increase, but they reported additional gains in interpersonal insights and articulated a desire to learn more about public health issues. In terms of voluntary testing, the cross-sectional study indicated significantly more students at two of three intervention schools (Blaise Diagne and Parcelles Assainies) knew where to get tested at endline than baseline. Across intervention schools, females' knowledge improved considerably. Whereas females at baseline had significantly lower odds of knowing where to get tested compared to males, at follow-up, this figure was significantly higher.

In terms of human rights, Sunukaddu participants disclosed thoughtful and empathic insights. A member of the Parcelles Assainies focus group declared, "People living with HIV/AIDS (PLWHA) have the same rights as we do. They have the right to work, they have the right to education." Participants in Sunukaddu 1.0 appreciated the instructors' examination of how to behave around PLWHA and benefited from the opportunity to put this knowledge into practice, in one case creating a short film in which they interviewed the president

Table 13.1 Multivariate logistic regression results showing intervention effect on knowledge of a place, to be tested at baseline and two-year follow-up. Dakar, Senegal, March 2008–2010

	Baseline (n=1639)		Two Years (n=1914)	
	OR (95% CI)	P	OR (95% CI)	P
<i>Know a place to get tested for HIV</i>				
School				
Rufisque (control)	1.00		1.00	
Parcelles	0.72 (0.53,0.97)*	0.031	1.81 (1.37,2.83)**	<.001
Blaise Diagne	0.81 (0.60, 1.08)	0.155	1.65 (1.27,2.14)**	<.001
Sacre Cœur	1.63 (1.11,2.41)*	0.013	0.83 (0.60,1.16)	0.274
Age				
14–16 years	1.24 (0.91, 1.70)	0.176	0.88 (0.50,1.54)	0.657
17–19 years	1.00		1.00	
20 years and older	.091 (0.67,1.23)	0.540	1.19 (0.96,1.48)	0.123
Gender				
Male	1.00		1.00	
Female	0.77 (0.63,0.95)	0.013	1.56 (1.28,1.89)**	<.001
ICT use scale				
Low	1.00		1.00	
Medium	0.62 (0.49,0.79)**	<.001	1.66 (1.31,2.09)**	<.001
High	0.45 (0.34,0.60)**	<.001	1.96 (1.52,2.54)**	<.001

*p<.05. **p<.001

ICT = information and communication technology.

Source: Massey et al. (2011)

of the association for PLWHA. One person who had participated in this film project stated, "This was an experience that impacted me greatly because I didn't expect him [the association president, a PLWHA and trailblazer for publicly disclosing his serostatus] to be so together and jovial—I thought that he would be emaciated. He was truly incredible." Sunukaddu 2.0 participants also produced work humanizing PLWHA, including a faux news report in which one participant played the role of a young female orphan with HIV.

Thanks to Campagne Sunukaddu's concentrated campaign, the message to support human rights by rejecting HIV/AIDS-related stigma and discrimination reached at least 500,000 Senegalese youths (Camara et al. 2010). Dissemination of the award-winning content encompassed 6000 posters plastered across Dakar, including 10 high school sites; 4000 cumulative minutes of radio play across 10 community radio stations; 150 minutes of TV promotion; 55 promotional billboards situated around the Dakar region; distribution of 2500 stickers featuring the award-winning design and slogan "If you love me, protect me"; 1500 stickers in Dakar public buses; distribution of 1000 CDs and 200 DVDs of youths' work; publication of at least six blog posts in partnering newspapers; dispatch of educational buses to 19 local high schools and middle schools; awareness programming at Teen Advice Centers; screening of youths' films at three partner establishments; and dissemination of 400 press releases to partners and journalists (Camara et al. 2010).

Sunukaddu-ites also reported additional knowledge gains. While one member of Focus Group A said that Sunukaddu 2.0 had changed his life by "developing his knowledge, especially on themes like AIDS and human rights," most Sunukaddu 2.0 participants disclosed superior "people savvy." They attested to an increased capacity to understand others, regardless of their health condition, and to communicate with them effectively. They also expressed a desire to learn more. While recognizing the seriousness of HIV/AIDS, they yearned to also study and combat other sources of suffering, such as malaria.

All three initiatives of Sunukaddu supported youths' production of public health messages across peer-friendly media formats. Sunukaddu 1.0 and 2.0 participants were introduced to digital equipment, techniques, and the fundamentals of message development. Sunukaddu 1.0 attendees split into groups in order to focus on their platform of interest (e.g., documentary film). Sunukaddu 2.0 attendees produced a platform-specific product during each session, and then concentrated on a final project of their choice. Several messages created by Sunukaddu-ites were posted to www.sunukaddu.com.

Campagne Sunukaddu collected over 600 contributions from hundreds of young creators. The promise of prizes and recognition likely motivated many youths to participate; as the first competition of its kind in West Africa, Campagne Sunukaddu also delivered a unique opportunity and incentive for youths to harness multimedia tools and make an impact.¹⁵

Sunukaddu also provided opportunities for peer and public education in multiple contexts: one-on-one, in large groups, face-to-face, virtually, in real time, and asynchronously. According to a Sacre-Cœur focus group member, "We learned how to raise students' awareness. We went into classrooms,

asked questions, the students answered, and we corrected them." Members of Sunukaddu 2.0 eagerly talked among themselves at emergent "coffee debates," discussed Sunukaddu-related topics with friends and family, and pledged to continue engaging their community in dialogue.

Content distribution via www.sunukaddu.com, YouTube, and Campagne Sunukaddu showcased creators' participation in a broad public health conversation; it is likely that observers also processed this work via interpersonal conversation, especially since discussing stigma and discrimination was modeled by Sunukaddu-ites on TV and radio. A member of Focus Group A suggested furthering public health and utilizing Sunukaddu graduates' skills by mounting a communication campaign in the greater Dakar area.

Sunukaddu participants also reported growth in terms of ICT, NMLs, and SELs. A member of the Sunukaddu 1.0 Sacre-Coeur focus group stated, "I appreciated the fact that I learned how to use audiovisual materials. Additionally, I learned how to write articles that I adore, whereas at school I hated to write papers." A Parcelles-Assainies focus group member attested, "Thanks to them [Sunukaddu], we are journalists in the field. We know how to use still and video cameras. We know how to write poems, articles, and news reports." Other participants commented on the specialized knowledge they had gained, such as the "art and magic" of production they had discovered by learning about angles, perspective, editing, and so on. Members of the Sunukaddu 2.0 focus groups also said that they had developed as ICT professionals by learning to manipulate software to edit audio and video, discovering new interests (such as creating graphic novels), and seeking and accepting work-related feedback.

Participants in both workshops answered the same set of questions on pre- and posttests regarding their perceived ICT ability. Participants rated their ability on a five-point scale: 0=None, 1=Beginner, 2=Novice, 3=Intermediate, and 4=Advanced. As shown in Table 13.2, gains in average scores were universally reported across both programs, ranging from a 10% to 51% increase above baseline.

Sunukaddu 2.0 participants also explored NML and SEL skills. To further develop participants' awareness, a Senegalese instructor introduced into the classroom a clothesline hung with placards, each bearing the name of a NML or SEL skill (see Figure 13.1). Over the course of the day, participants critically analyzed their practice, identified operative NMLs or SELs, and pulled down the associated placards. At the end-of-day reflection, they presented the placards they had pulled down and explained why.

Via the clothesline-placard system, participants of Sunukaddu 2.0 accurately identified and explained relevant NML and SEL skills. On daily posttests, they also indicated their perceived ability level vis-à-vis the 12 NMLs, circling whether they could "Recognize," "Talk about," or "Do" each NML (Joseph 2009). When Sunukaddu 2.0 concluded, participants reported which NMLs and SELs they believed they had mastered. Of the 23 reporters (22 youths and 1 teacher), 20 identified the NML skill negotiation as an area of expertise. Negotiation is "the ability to travel across diverse communities, discerning and respecting multiple perspectives, and grasping and following alternative norms"

Table 13.2 Sunukaddu 1.0 and Sunukaddu 2.0 participants' average reported Information and Communication Technology (ICT) skills, pre- and postintervention.

	<i>Sunukaddu 1.0*</i>		<i>Sunukaddu 2.0</i>	
	Pre (n = 29)	Post (n = 25)	Pre (n = 25)	Post (n = 24)
Computer	2.74	3.12	1.45	2.52
Audio	1.49	3.49	1.14	2.67
Video	1.64	3.66	2.05	2.7
Photography	2.21	3.47	1.41	3.30
Journalism	1.17	3.1	.57	2.05
Posting	1.73	2.35	.52	2.35
OVERALL	1.83	3.2	1.19	2.6

*Source: Mossey et al. (2009).



Figure 13.1 Sunukaddu 2.0 participants complete that day's pretest beneath "competence clothesline" strung with new media literacy (NML) and social and emotional learning (SEL) placards.

(Jenkins et al. 2006, 4). Collective intelligence, "the ability to pool knowledge and compare notes with others toward a common goal" (Jenkins et al. 2006, 4), was the next most cited NML skill, embraced by 16 participants.

Both skills boast meaningful relations with SELs, particularly social awareness and relationship skills. Since the top two self-identified SEL areas of expertise were responsible decision-making and self-awareness, four of the five SEL skills grew substantially.¹⁶

Participants of both summer workshops also reported newfound abilities that reflected growth in SEL skills. Members of Focus Groups A, C, and

Parcelles-Assainies mentioned overcoming shyness, which helped them to interact with strangers or speak publically. Sunukaddu 2.0 adherents also claimed improved ability to self-motivate, manage anger, and exercise patience and good judgment. Stated a participant from Sacre-Coeur, "I learned how to appreciate the spirit of the group, how to respect everyone. I've acquired more assurance and I approach others to listen to them." Youths from both trainings thought more about their future careers and, in a few cases, declared new professional orientations (e.g., teacher, director).

Discussion

Sunukaddu achieved its four objectives: to impact acquisition of HIV/AIDS-related knowledge; support production of youth-oriented, multimedia public health messages; facilitate participation in public health conversations; and guide the development of ICT, NML, and SEL skills.

Participants' improved knowledge of STI testing locations should be understood in context. These data were collected from approximately a quarter to a third of each school's student body, not from Sunukaddu-ites exclusively. It is reasonable to assume that individuals who directly participated in Sunukaddu would demonstrate even greater knowledge gains, and so Sunukaddu's direct impact might outstrip these figures.

But the implications of this knowledge increase are unclear. It may indicate Sunukaddu's success in diffusing information across the general student body, and so make a case for the efficacy of educating a few core individuals within a community of interest. Alternatively, it may be attributable to other educational inputs encountered over the two-year interim; indeed, since student-club-participation rates were modest, the extent to which education emanated from these vectors is an open question. Future research might ask participants to identify the source of their information¹⁷—how do they know what they know? This investigation might clarify why students at one of the intervention schools were not more likely to know about testing centers at follow-up.

Since females disproportionately suffer from HIV/AIDS, their greater knowledge of testing centers is an important result. It also opens a new line of inquiry. Is this information more accessible within females' social networks? Is it more engaging or comprehensible to females? Is it more socially acceptable for females to publicly embrace it?

Campagne Sunukaddu saw an impressive quantity of messages dispersed and audience members reached; the longevity of these messages' impact deserves consideration. Creating original multimedia works likely motivated participants' cognitive elaboration and interpersonal conversation, processes that boost information salience and recall (Petty and Cacioppo 1986). The impact of messages crafted by local youths (as opposed to professionals or outsiders) also might have struck a chord, as these messages could have been perceived as more authentic, accessible, or appropriate. Audience members also might have regarded the

youthful creators' fear as inspirational and personally internalized greater self-efficacy and collective efficacy. The novelty of this campaign and its invitation to join in something new also might have resonated with any routine wears Senegalese.

As the world is only growing more digitally integrated and socially interconnected, participants' development of ICT, NMI, and SEL skills is extremely important. Not only do twenty-first-century citizens need access to ICT, but they must know how to manipulate ICT to advance their informational, communicative, and social agendas (Bowie 2000; Jenkins et al. 2006). Although both workshops' postintervention ICT scores were higher than baseline and reflected the same degree of overall change from baseline to endline (Sunukaddu 1.0: 34% increase, Sunukaddu 2.0: 35% increase), magnitudes differed by category, which might reflect the different populations' unique learning styles or the workshops' dissimilar foci. Whereas Sunukaddu 1.0 focused on developing ICT skills for HIV/AIDS messaging, Sunukaddu 2.0 focused on developing NMIs and SELs for robust communication *within the context of* manipulating ICT for HIV/AIDS messaging.

In terms of NMIs and SELs, participants reported meaningful gains intrapersonally and interpersonally. Their improved ability to negotiate and collaborate, as well as their gains in self-awareness¹⁸ and self-management, can facilitate several desired outcomes. Youths may feel more motivated to engage in civic activities thanks to their increased sense of self-efficacy vis-à-vis communication and participation.¹⁹ Their skills also might help them to better acquit themselves in these spheres, or even to create the spheres (such as youth councils) themselves. Advocating for themselves in educational, professional, and intimate contexts also might stem from this rich skill base. Various studies of SEL curricular interventions have demonstrated that training in these social and emotional skills delivers an impressive return on investment (Hawkins et al. 2008; Durlak et al. 2011; Zins et al. 2004). SEL students are more likely than their peers in control groups to earn higher grades, test scores, and incomes; sense and support community connectedness; and better manage mental and sexual health. This implies that Sunukaddu participants are poised to enjoy enhanced quality of life and enrich their communities, possibly by embracing self-definitions and responsibilities of "citizen" and "leader." Future research could investigate whether such a link exists by collecting data on Sunukaddu participants' civic participation and personal attainment pre- and postintervention.

Interpersonal conversation significantly boosts the impact of mass-mediated public health messages (Sood 2002; Papa et al. 2000; Chatterjee et al. 2009); communication infrastructure theory (Kim and Ball-Rokeach 2006) maintains that access to stories about one's community predicts civic engagement. Thus, the importance of local stories told by microlevel and meso-level storytellers should not be underestimated. According to Rizza (2006), locality is key—as the world becomes increasingly global, persuasive messages must become increasingly local. While stories' capacity to connect one with another is valuable in and of itself, especially to the Senegalese who repeat the communal statement "mo la" ("we are together") to express agreement and support, connection also

facilitates actors' attitudinal, motivational, and resource health—as well as their health.

The current intervention, in sum, is a promising first step in building self-reliance, self-efficacy, and self-empowerment. The 2009 Dart 2009 investigation, moreover, can identify multiple other factors

Sunukaddu participants' involvement in public support efforts (Rideau et al. 2010). The current efforts are also significant in that they provide participants with the opportunity to manage their own civic and public health efforts.

In conclusion, the current intervention method, which involves a variety of topics and a variety of activities, is a promising first step in building self-reliance, self-efficacy, and self-empowerment. The 2009 Dart 2009 investigation, moreover, can identify multiple other factors

Education
attained, etc.

facilitates action (Wolton 2009). Enhanced storytelling participation by sundry actors also increases the diversity of the messages and, therefore, their odds of resonating with multiple audiences. Future measures of "participation in public health conversations" might investigate features of these interpersonal exchanges, as well as track contributions to various dialogic sites.

The consideration of more objective measures, such as educational, employment, and/or medical records, would add richness to the Sunukaddu data corpus. Self-report measures have value, as participants' perceptions shape their reality and self-efficacy, which can mediate behavior. Honoring participants' lived experiences also helps to capture the full extent of a program's impact (Davies and Dart 2005; Singhal, Dura, and Felt 2011) and ensures ethical partnerships among investigators and research participants (Langhout and Thomas 2010). However, inaccurate judgment and social desirability bias (Maccoby and Maccoby 1954) can degrade the quality of self-reported data. Greater triangulation, or the use of multiple measures to capture data on the same construct, should be pursued in order to boost research validity.

Conclusion

Sunukaddu's innovative work offers implications for theory, policy, and practice in public health, communication, and education. Gains in knowledge and skills support theories of situated (Lave and Wenger 1991) and participatory learning (Reilly et al. in press)—that is, learners experience greatest success when their efforts are contextualized within a community of practice. Sunukaddu's success also suggests a new theory of change for education, public health, and communication for development. Not only are bottom-up approaches effective, but participants seem to benefit from digging deeper—cultivating primary skills in intrapersonal and interpersonal negotiation. Future theorists and practitioners might investigate the many advantages (e.g., cognitive, social, emotional, and civic) of specifically tapping youths for producing youth-oriented, multimedia public health messages.

In terms of practice, community-based communication initiatives should enrich public health interventions and, in many cases, should *be* the public health interventions. Additionally, this skills-focused (rather than knowledge-focused) method could be more meaningful in the short- and long-terms, enriching relations with self and others as well as delivering versatile tools to be applied across topics and time. Communication in open societies is distinguished by greater volume (more messages exchanged) and greater participation (more citizens involved), which challenges making sense and being heard. More than ever, programs like Sunukaddu are needed to guide people's negotiation of these new jungles of information and interconnection. This is especially imperative if one's object is persuasion and one's audience is unique or hard to reach. Finally, privileging participants' voices in terms of message creation and data collection are practices that should become more common.

Educational policy in Senegal and beyond might shift to prioritize more situated, expressive, multimedia-rich, and skills-based learning opportunities, as

well as support after-school programs. Declared a member of Focus Group A, "The hospitality here... I didn't want to go home. This is a model for Senegalese schools." Public health policy should respect the importance of developing youths' and communities' dialogue and civic participation.

Sunukaddu's three initiatives—Sunukaddu 1.0, Campagne Sunukaddu, and Sunukaddu 2.0—have contributed to youths' acquisition of HIV/AIDS-related knowledge; production of youth-oriented, multimedia public health messages; participation in public health conversations; and development of ICT, NML, and SEL skills. Importantly, by welcoming their expression, supporting their enrichment, and facilitating their engagement in civic life, Sunukaddu also addressed the communicative impasse that had stymied Senegalese youths. This opportunity also improved their access to credible, crucial information regarding RH.

Sunukaddu's graduates are already reaping the rewards. Proving his self-proclaimed expertise in negotiation, networking, and responsible decision making, Azoupy enrolled in a graphic design course post-Sunukaddu and landed a job as a graphic designer/video editor. He has also hatched a new dream: to open his own advertising agency. As Sunukaddu's and Azoupy's own experience suggests, fostering youths' communicative capacities is an effective way to prepare future leaders and catalyze social change.

Notes

1. Which refers to formal marriages and informal unions in which before the age of 18 a girl lives with a partner as if married (UNICEF 2005).
2. Because young brides commonly drop out of school as well, they lose access to various experiences and services known to boost their own and their families' health.
3. It is important to note, however, that addressing ignorance won't wholly eradicate HIV/AIDS. Since its transmission is often entangled in complex social behaviors, such as polygamy, responses must be more sophisticated than a basic information campaign.
4. Fifty-eight percent of its population is under age 20 (UNICEF 2011); 44%, under age 15 (Population Reference Bureau 2011).
5. Well below the region's median value of 83% (UNESCO 2000).
6. Seventy percent of American youth report going daily; only 24% were limited to once a week (Lenhart et al. 2011, 16).
7. Exceptions include GEEP and PLAN, whose programs encourage youth expression.
8. In response, Senegalese hip-hop artists launched "Y'en a marre" (slang for "I'm fed up"), an informal political movement intended to attract youthful concertgoers and motivate their protests against governmental shortcomings (Maro 2011).
9. With the financial support of the Open Society Initiative West Africa (OSIWA) and in partnership with SIDA SERVICE and ASPROCIDE.
10. A Wolof term meaning "our voice."
11. All of the participants also chose to undergo STI testing, and all tested negative.
12. Using probability proportionate to size.
13. Such as a laptop, mobile telephone, and camera, as well as internships and scholarships.
14. The club's sponsoring teacher also joined the workshop as a fellow learner.
15. Significantly, this ambitious project was executed with the relatively modest budget of USD 180,000.
16. The final SEL skill of self-management ("regulating one's emotions to handle stress, control impulses, and persevere in overcoming obstacles; setting and monitoring progress toward personal and academic goals; expressing

emotions appropriately") is a much more specialized skill that wasn't explicitly taught.¹⁷ Although this risks source-attribution error and compromise by other memory failures (Schacter 1999).¹⁸ Possibly a novel consideration for these natives of more collectivistic cultures.¹⁹ In Senegal, 80% of those aged 25 and over say they have voted in the last four elections.^p

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