

ANNEX E: Sample VCAT Exercise for ASRH

This is a tool referenced in the [Tools for Clarifying Values](#) section of Chapter 6: ASRH Services & Interventions. In order to create an enabling environment, Values Clarification and Attitude Transformation (VCAT) activities and workshops can be conducted with wide range of stakeholders in various training formats and meetings. You may adapt this VCAT activity to reflect the contexts of any humanitarian setting and refer to Ipas' VCAT toolkits for additional VCAT activities.

Values Clarification Exercise: Agree or Disagree?

Introduction

This activity is designed to help participants reflect on their level of comfort discussing, advocating for, and/or providing adolescent-friendly services. Participants are encouraged to reflect on their life experiences that influenced these attitudes and comfort levels and how they relate to norms on adolescent sexual and reproductive healthcare.

Objectives

By the end of this activity, participants will be able to:

- Articulate their beliefs about adolescents accessing reproductive health services
- Defend and respectfully explain other, sometimes conflicting, points of view
- Explain different values underlying a range of beliefs on adolescent reproductive health
- Discuss ways to ensure a professional standard of high-quality adolescent-friendly services, regardless of personal beliefs
- Materials:
 - Wall signs or handwritten signs labeled “Agree” and “Disagree” in separate corners of the room
 - Tape (for attaching signs to the wall)

Timeline: One hour

Instructions:

The person facilitating the VCAT should:

1. Explain that the purpose of the exercise is to explore feelings, attitudes, and values regarding adolescents and reproductive health and how those values might influence how healthcare workers provide ASRH care for adolescent patients.
2. Put up the two signs (Agree, Disagree) on the wall or floor.
3. Explain that you will read five statements, one at a time. After each statement, participants should move to the side of the room based on whether they agree or disagree with the statement. Participants should be honest about their feelings and resist being influenced by where other participants move.

4. Begin the exercise using Content: Values Clarification Statements. Use the following process for each of the five statements:
 - a. Read statement aloud and ask participants to move to the side of the room based on whether they agree or disagree with the statement.
 - b. Ask one participant from each side of the room to explain the reason for their response and facilitate a brief discussion after each statement to encourage further reflection. Please note that the point is to encourage participants to think about how the values they hold might impact access to and quality of services but should not make anyone feel defensive about their response. If any participants would like to move to the other side of the room based on someone else's point, they may.
 - c. As the facilitator, you should remain cognizant that the responses to each of the five statements may vary if you adapt the statements for different subgroups of adolescents.
5. After the five statements have been read, ask participants to sit down and then lead them in a discussion using Content: Discussion Questions.

Content: Values Clarification Statements

1. Adolescents should not have sex.
2. Adolescent girls should never have an abortion for any reason.
3. Parents of an adolescent who is receiving any sexual and reproductive health (SRH) service should be informed, whether the adolescent agrees or not.
4. Adolescent counseling should focus on ensuring that youth abstain from sex.
5. If I provide contraception, it is as if I am encouraging the adolescent to have sex again.

Content: Discussion Questions

The purpose of this exercise is not to persuade others to adopt certain positions, but rather to listen and reflect on what we think and feel about various issues.

- What observations do you have about your own responses to these statements?
- What about your responses or others' responses to these statements surprised you?
- How would you have responded differently if these statements were discussing access to SRH services for boys or SOGIE populations?
- What is the relationship between your attitudes to these statements and your ability to provide high-quality and compassionate care to adolescents?
- Use these questions to probe participants to reflect further on how the beliefs reflected in these statements might affect providers' ability to offer compassionate care to adolescents.
 - Reading statement #1: If an adolescent does have sex, either by choice or by coercion, what role can the provider play in ensuring that she/he/they remains healthy?
 - Reading statement #2: Why do you think some adolescents might seek SRH services? Do you think that a provider's view on SRH should prevent him or her from treating a patient who needs services and life-saving treatment? How can providers help adolescents to prevent future unintended pregnancies?

- Reading statement #3: What do you think will encourage your patients to trust you and come back to the health facility? If a provider tells the adolescent's parents, will this damage the trust that the adolescent has in the provider/facility?
- Reading statement #4: It can be difficult or impossible for a young person to abstain for various reasons. How can we ensure that young people remain healthy when they are not able to abstain? How can providers ensure adolescents have the information and services needed to make their own decisions?
- Reading statement #5: Research shows that providing accurate information and contraception does not lead to increased sexual activity among young people. It only ensures that they are protected if they choose to have sex. How can you, as a provider, ensure that the adolescent lives a healthy life?
- How can you be a better provider of SRH services and other services to adolescent patients? How can you ensure that adolescents' right to comprehensive sexual and reproductive healthcare is respected and fulfilled?

Key Messages

Individuals' discomfort with some women's reasons (for having sex, unintended pregnancy, and abortion) results in the implementation of reproductive health policies, laws, and service delivery systems that deny certain women access to safe, high-quality reproductive healthcare. This can lead to adolescents risking their health and lives to procure a possibly unsafe SRH practice or being hesitant to access available services. In other words, it creates health disparities and often-tragic health outcomes.

Ensure participants grasp that this disparity in access to reproductive healthcare (family planning, post-abortion care, sexually transmitted infection [STI] screening and treatment, etc) is often based on individual, subjective beliefs about what are "acceptable" versus "unacceptable" reasons for pregnancy and reproductive health.

We have a professional responsibility to ensure adolescents receive quality counseling and reproductive health services. If we are uncomfortable with counseling or providing services, we should refer women to safe services.

Adolescents may avoid safe reproductive health services because they are afraid of being mistreated by healthcare providers or staff. As providers/healthcare staff, we should ensure that we treat women professionally and with respect, regardless of their reasons for terminating a pregnancy—even if their reasons may challenge our personal beliefs.

Sources: Adapted from [Youth-Friendly Postabortion Care Supplemental Training Module](#) (PAC Consortium, 2012) and [Abortion Attitude Transformation: Values Clarification Activities Adapted for Young Women](#) (Ipas, 2013).