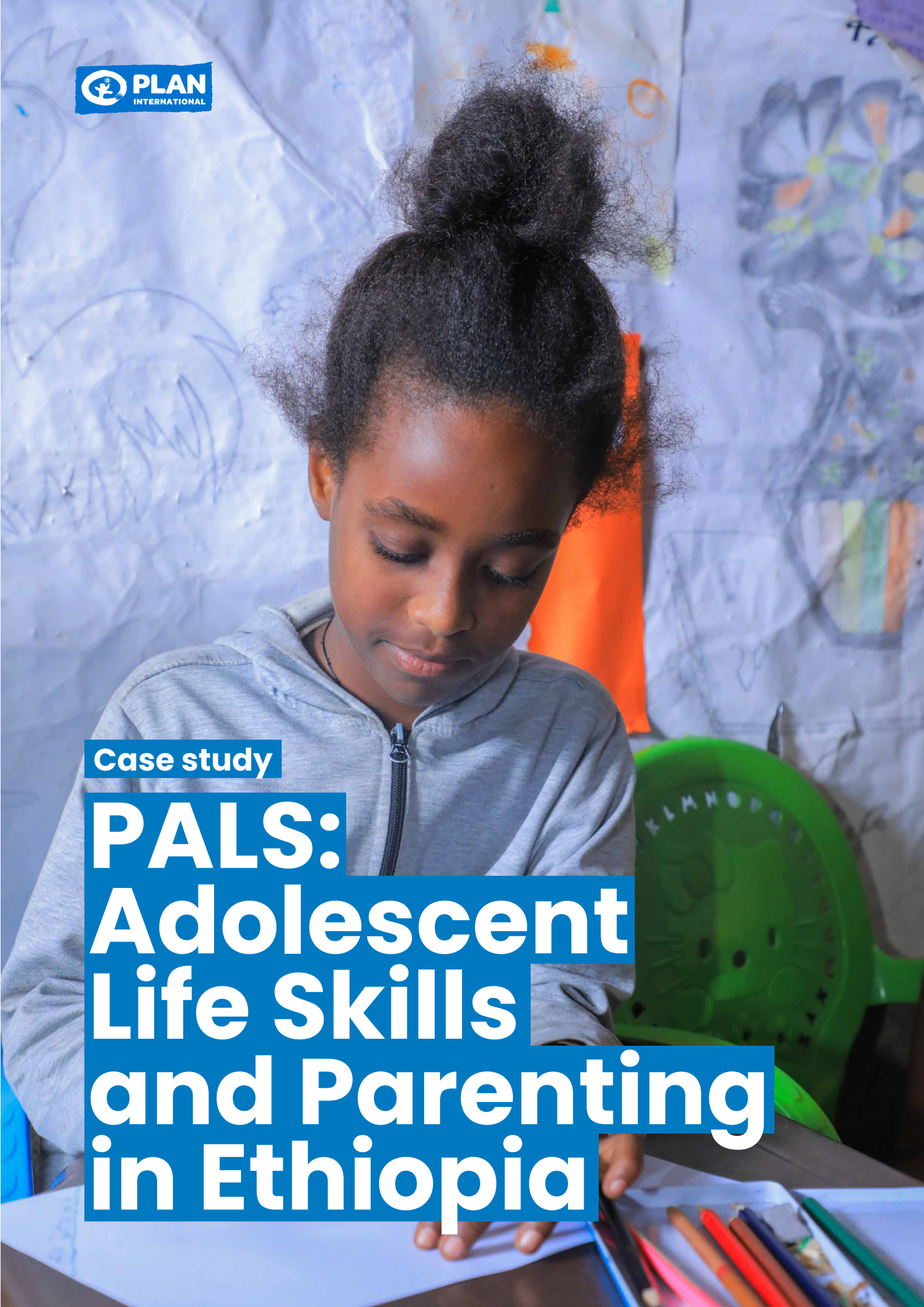


Case study

PALS: Adolescent Life Skills and Parenting in Ethiopia

Contents

Plan International

Plan International strives to advance children's rights and equality for girls all over the world. We recognise the power and potential of every single child. But this is often suppressed by poverty, violence, exclusion and discrimination. And it is girls who are most affected.

As an independent development and humanitarian organisation, we work alongside children, young people, our supporters and partners to tackle the root causes of the challenges facing girls and all vulnerable children.

We support children's rights from birth until they reach adulthood, and help children to prepare for and respond to crises and adversity. We drive changes in practices and policy at local, national and global level through our reach, experience and knowledge. For over 75 years, we have been building powerful partnerships for children, and we are active in over 70 countries.

Cover photo: Plan International

PALS in Ethiopia

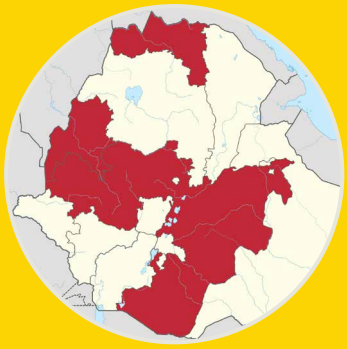
Overview

> *"I have faced many challenges in my life, but the support I received from PALS has completely changed me. Now, I am strong enough to overcome any obstacles and pursue my dreams through education".*
>
> - John[1], 15-year-old male adolescent, PALS Life Skills participant, Tigray Region, Ethiopia

PALS programme goal: To promote the psychosocial well-being, health and safety of adolescents aged 10-19 in crisis settings.

Steps towards implementation

PALS contextualisation with adolescents, parents/caregivers and communities



Locations: Tigray, Oromia and Benishangul Gumuz Regions, Ethiopia

Formation of PALS adolescent and parent groups

Delivery of the contextualised life skills and parenting programme

Challenges and lessons learnt

- In some areas, communities were initially reluctant to discuss topics related to gender-based violence, mental health and parenting practices. This was addressed by involving trusted community leaders and adapting language by using local terms and introducing new concepts step-by-step.
- In some projects, the team faced resource restrictions for session materials and refreshments. This was addressed by securing additional funding and mobilising local support, which also contributed towards sustaining programme delivery.
- Adolescents formerly associated with armed groups and adolescents who had experienced violence experienced initial barriers to participating in group sessions. One-to-one support and introducing more local creative-based methods such as storytelling improved participation and outcomes.

Impact

- 3751 adolescents (1937 girls and 1814 boys) completed the PALS programme in Tigray, Benishangul Gumuz and Oromia.
- Adolescents reported that they had gained more self-confidence, reconnected with peers and felt valued in their communities.
- Parents and caregivers improved their communication skills, reduced harsh discipline and improved their relationships with their children.

Key recommendations:

- Develop a locally led, sustainable scale-up strategy for PALS
- Develop a contextualised PALS curriculum for each region
- Develop a community engagement strategy to promote local ownership and male engagement
- Provide adolescent-friendly, essential services alongside PALS including mental health, child protection response services, health services and food security and livelihoods

[1] * To maintain the confidentiality of participants in this case study, all names used are fictional. Actual names have been withheld to protect the privacy and anonymity of the individuals involved.

SUMMARY

This case study describes the implementation of the Parenting and Adolescent Life Skills (PALS) programme in a Sudanese refugee camp in Benishangul Gumuz region, in drought-affected communities in Oromia region and in conflict-affected Tigray region in Ethiopia. The programme was a key component in adolescent-responsive projects which aimed to address the high levels of psychosocial distress, critical child protection risks and gaps in sexual and reproductive health information and services. The case study highlights how the programme was designed, implemented and adapted to the unique challenges of each humanitarian context. It examines the effectiveness of the life skills and parenting sessions, providing insights into good practices and lessons learnt.

About PALS

Plan International's Parenting and Adolescent Life Skills (PALS) programme promotes the psychosocial well-being, health and safety of adolescents aged 10 to 19 in crisis settings.

The PALS programme uses four strategies:

- Providing life-saving **information** to adolescents and their families
- Strengthening the **life skills** of adolescents and positive **parenting practices** of their parents and caregivers
- Promoting positive and supportive **parent–child relations**
- Linking adolescents and their families to locally available **services and support**

PALS is a three-month programme with weekly Life Skills sessions for adolescents and Parenting sessions for their parents/caregivers.

PALS Life Skills and Parenting groups run separately but in parallel to one another. This helps to reinforce mutual learning, increase families' access to services and promote supportive parent-child relations.

PALS Life Skills sessions engage adolescents in interactive ways to learn, share and practise skills which support adolescent well-being, health and protection. Through creative play and arts such as games, music and drama, adolescents can express themselves, build confidence, learn and connect with peers. Play-based methods have been developed in partnership with Clowns without Borders.

PALS Parenting sessions are discussion- and activity-based and aim to support parents to access essential information, skills and services which support their own well-being and that of their adolescents.

This case study was developed based on conversations with PALS implementing teams and individual participants, as well as analysis of M&E data and project documentation including project reports. All information was collected using informed consent in line with ethical data collection and safeguarding measures. The case study does not include real names or other identifiable information of programme participants.

Key Learnings in Ethiopia

PALS must be implemented alongside multi-sectoral services: Adolescents affected by violence, displacement, family separation and forced recruitment require multi-sectoral services which must be implemented alongside the PALS programme. In Tigray, individual counselling, group-based psychosocial support and other reintegration support was essential to help rebuild trust, confidence and social relationships of adolescents formerly associated with armed groups.

Community engagement is key to overcoming cultural barriers: Involving local leaders, male caregivers and trusted community members is essential to greater acceptance of the programme, addressing sensitive topics such as gender-based violence (GBV), child marriage and mental health and promoting male engagement.

Local contextualisation increases programme effectiveness: Adapting the curriculum to the local context, including translating materials to the local language and incorporating culturally relevant and play-based activities was essential to fostering participation and addressing the unique needs of participants in each region.

Referral systems are vital for comprehensive protection: Establishing strong referral pathways for specialised response services (e.g., child protection and GBV case management and mental health and psychosocial support services) ensured that participants requiring additional care were adequately supported beyond the scope of the PALS sessions.

BACKGROUND

Humanitarian context in Ethiopia

Ethiopia is facing multiple humanitarian emergencies due to climate change, conflict and insecurity. As of 2024, more than 21 million people were in need of humanitarian support, half of them children. Ethiopia is also home to over 1 million refugees and asylum seekers, primarily from South Sudan, Somalia, Eritrea and Sudan. This case study covers the humanitarian contexts of Benishangul Gumuz, Oromia and Tigray regions.

Tigray region in northern Ethiopia was the centre of armed conflict between the Ethiopian federal government and the Tigray People's Liberation Front (TPLF) between 2020 and 2022. The conflict led to massive and acute humanitarian needs in the Tigray, Afar and Amhara regions. Post-conflict, the humanitarian needs remain high with millions facing food insecurity and tens of thousands of children severely malnourished and with no access to education and basic services. Many children and adolescents, particularly girls, have been subjected to severe forms of violence, including sexual violence, abduction and forced recruitment.

Benishangul Gumuz is a region in north-western Ethiopia bordering Sudan which hosts predominantly refugees from Sudan across three refugee camps: Bambasi, Tsore and Sherkole. Bambasi refugee camp was established in 2012 and currently hosts nearly 20,000 refugees from Sudan. Essential services in Bambasi camp are limited, including food support, education, health, psychosocial support and protection services.

Borena Zone in **Oromia region** in southern Ethiopia faces significant humanitarian needs due to the compounding impacts of drought, conflict and displacement. The region is experiencing food insecurity, malnutrition, water shortages and displacement. The latest drought has increased poverty levels and compromised access to essential services for children and their families, including food, education, healthcare and protection services.

Impact of the crises on adolescents and the specific needs of girls

All three regions present unique threats and challenges which affect adolescents. Across all three settings, adolescents face unique risks due to their age-related roles and responsibilities they take on in their families and communities. School drop-out, malnutrition and lack of access are drivers of child labour, family separation and psychosocial distress among adolescents. Insecurity, pervasive gender inequality and collapsing protection mechanisms place adolescent girls at extreme risk of sexual and gender-based violence and sexual exploitation and abuse (SEA), particularly in Tigray region.

- Child protection: Across all three regions, significant child protection risks affecting adolescents were reported including family separation, neglect and child labour. Adolescent girls face significant risks of sexual and gender-based violence including child marriage, sexual violence, sexual exploitation and trafficking. In Tigray, sexual violence including rape has been used as weapon of war against girls and women. Adolescent boys have been forcibly abducted, trafficked and recruited into armed groups and armed forces and many adolescents have been killed in the violence. Across all three regions, food insecurity, loss of livelihoods, insecurity and weakened social and protection mechanisms are the key drivers of child protection risks. In addition, risks of sexual exploitation and abuse (SEA) at the hands of those responsible for providing humanitarian assistance has also been widely reported, also affecting adolescents, particularly girls.
- Mental health and psychosocial distress: Across all three regions adolescents report significant signs of psychosocial distress, including prolonged -toxic- stress as a result of unmet humanitarian needs. Particularly in Tigray, insecurity, exposure to violence and loss of family members continue to cause high levels of psychosocial distress among adolescents. Commonly reported problems include chronic sleeplessness, anger, isolation, shame and guilt, suicidal thoughts and family concerns.
- Education: Compared to their younger peers, adolescents face more challenges to continue their schooling. In times of crisis, traditional norms require adolescents to take on adult responsibilities and support their families. Adolescent boys may be forced to take on work to support the family income whilst girls are responsible for household chores or childcare, limiting their opportunities to develop and learn. In some areas, secondary and non-formal education, although available, are limited, leaving gaps for adolescents, especially those with special needs or who have missed years of education due to the crisis.
- Access to services: Across all regions, access to services is limited due to insecurity, destroyed infrastructure and insufficient humanitarian funding. Gaps in food assistance, livelihoods, education, protection and health services including sexual and reproductive health are key concerns for adolescents and their families. In conflict-affected Tigray, many physical structures have been destroyed, limiting access to services. Many internally displaced persons (IDPs) live in temporary settlements and IDP sites with poor living conditions. Sites which are overcrowded and do not meet basic living requirements, increasing risks of outbreaks of disease and further increasing protection risks for adolescents, particularly girls. Restricted movement of girls and women, stigma and traditional norms form key barriers for accessing information and services for adolescents, particularly sexual and reproductive health (SHR) information and services and case management services for child protection and gender-based violence.

Programme priorities for adolescents

To address the needs and risks identified, Plan International Ethiopia has identified multi-sectoral programme priorities in each region to enhance the health, protection and well-being of adolescents in crisis settings. Key interventions include:

- Child protection case management and referrals to GBV response services.
- Mental health and psychosocial support intervention for adolescents and their parents/caregivers ranging from psychosocial support activities in child-friendly spaces to community engagement, life skills and parenting programming (PALS) and individual counselling in Tigray, where mental health needs were significant.
- Social inclusion intervention such as mentorship and peer-support activities to promote social support and (re-)integration of excluded adolescents, such as children formerly associated with armed groups and armed forces (CAAFAG) in Tigray.
- Education: Access to formal and non-formal education including vocational training for adolescents, particularly girls and other at-risk groups.
- Sexual and reproductive health and rights (SRHR): Information and awareness activities related to SRHR and referrals to SRH services.
- Protection from Sexual Exploitation and Abuse (PSEA): prevention and response activities to prevent and respond to SEA risks in Plan International's humanitarian response.

The programme intervention in each region were selected based on the context-specific needs and risks and often integrated with food security and livelihoods assistance to address financial barriers. In each region, PALS was included as core intervention in adolescent-responsive projects.

SETTING UP PALS

Coordination with local partners

The Parenting and Adolescent Life Skills (PALS) programme in Ethiopia is implemented by Plan International directly, in close conjunction with local partners and government stakeholders.

In **Tigray** PALS was implemented by Plan's child protection officers and social workers. Prior to implementation, the local government endorsed the PALS curriculum and roll-out of the programme to support conflict-affected adolescents. The Bureau of Social Affairs and Rehabilitation and Bureau of Health were also involved in the programme implementation, as they were responsible for monitoring, follow up and evaluation as well as providing technical support to deliver content related to sexual and reproductive health, SGBV and aspects of MHPSS.

In **Oromia** PALS was implemented by Plan in partnership with the district Women and Children Affairs Office (formal) and the community child protection structures (informal) which were organised locally. Their involvement was critical as they were familiar with the cultural and social landscape of the Borena Zone, which played a crucial role in facilitating sessions and mobilising participants. Their understanding of the local context ensured that the PALS programme was both culturally appropriate and relevant to the challenges faced by families affected by drought and displacement.

In **Benishangul Gumuz** PALS was implemented by Plan in partnership with the local refugee groups represented in the refugee camps. These included refugee leaders and community-level groups focussed on the protection and well-being of children.

PALS Adolescent Life Skills groups

Adolescents were invited to participate in the PALS programme based on specific targeting criteria set in each individual project and in line with context-specific needs. In **Tigray**, the programme was implemented with adolescents aged 10 to 17. In **Oromia**, adolescents aged 10 to 19 were invited for the programme. In **Benishangul Gumuz** adolescents aged 13 to 19 participated.

In line with the PALS guidelines, the programme targeted crisis-affected adolescents in line with locally set vulnerability criteria. In **Tigray**, these criteria included adolescents who were separated or unaccompanied, adolescents from child-headed households, displaced adolescents, child survivors of violence and adolescents with disabilities. In **Oromia**, additional targeting criteria included adolescents affected by drought, loss of livelihoods and school drop-out. In **Benishangul Gumuz**, adolescents who were out of school, at risk of child marriage and adolescent survivors of SGBV were prioritised. Adolescents were identified and mobilised through community leaders, teachers, caregivers, child protection committees and humanitarian organisations to ensure that those most in need were prioritised. Awareness-raising activities such as local meetings and information sessions were implemented to share information about the programme and encourage participation.

Across all regions, mixed gender groups were formed, in order to foster relations between girls and boys and promote social inclusion. During the sessions, groups were split in same-sex groups for specific sessions or activities where it was culturally more appropriate to have discussions in same-sex groups, particularly in sessions related to gendered risks and SRHR. Separate groups were formed for younger and older adolescents (e.g. 10-14 and 15-17/ 15-19), except in **Oromia**, where groups included participants aged 10 to 19, where, within sessions, age-specific sub-groups were formed for specific activities. The group size across all three regions was between 15 and 20 participants.

PALS Parenting groups

Across all regions, the PALS programme targeted the parents and caregivers of the participating adolescents, where this was possible. This included foster caregivers of unaccompanied and separated adolescents, as well as extended family members with a caregiving role such as grandparents or older siblings.

Groups consisted of 10 to 20 participants and community outreach strategies followed a similar approach to the mobilisation of the adolescents, supported by local community (*kebele*) leaders, community facilitators and outreach activities. In **Oromia**, female and male caregivers participated in mixed groups, whilst in **Benishangul Gumuz** and **Tigray**, separate groups were formed for female and male caregivers as it was deemed more appropriate and comfortable for caregivers to discuss more sensitive topics in same sex groups.

National contextualisation process

Given the vastly different humanitarian contexts within Ethiopia, a two-level contextualisation process was implemented. The first contextualisation was done at national level to adapt the PALS programme to the general context of Ethiopia and prepare for implementation in Gambella (South Sudanese refugee camps), Benishangul Gumuz (five ethic groups and refugees from Sudan and South Sudan) as well as Afar and Tigray. An external consultant was hired to conduct a mini-assessment to identify areas for contextualisation. They also supported field teams in mapping out services in each location and develop key messages on how to communicate about PALS with communities. One of the key insights during the contextualisation process was how open local communities were to the content of the PALS programme. The child protection in emergencies technical advisor recalls:

"We were surprised that the communities were very open to the programme, especially in Afar where sexuality is a very sensitive topic. But when properly communicated, we can actually talk about it. It turned out to be a very important topic to parents and adolescents as they have a lot to share, as gender-based violence, child marriage and female genital mutilation (FGM) rates are very high in this region".

Adapting the PALS programme to the local context

A second-level contextualisation process was conducted at sub-national level, led by local project teams. To enhance accessibility and effectiveness, the PALS curriculum was translated and contextualised into the local languages. M&E tools such as pre- and post-tests were also conducted in the local language to assess participants' knowledge and progress. Following the contextualisation process, several sessions were added to the curriculum in specific regions.

In **Tigray**, sessions were adapted to respect cultural norms while gradually introducing new concepts. In the sessions, the context-specific family structures and caregiving role of extended families, neighbours and elders were considered. The session content acknowledged traditional gender roles whilst also discussing key concerns for adolescents. The sessions incorporated traditional games and culturally appropriate forms of arts such as poetry to make the participants more comfortable and promote active participation. These adaptations ensured that sensitive topics like GBV prevention and positive discipline were addressed in a way that participants could relate to and accept.

Furthermore, to ensure that the programme met the psychosocial needs of participants, the curriculum integrated trauma-informed approaches to address the experiences and risks faced by adolescents and caregivers, particularly girls and women, in Tigray. Given the stigma around discussing mental health and gender-based violence, facilitators employed storytelling, play-based activities and community dialogue sessions to create a safe and supportive learning environment. Session content related to peer pressure and adolescent pregnancy was expanded as these were key concerns for adolescents. In addition, extra sessions were included to address context-specific issues such as unsafe migration and sexual exploitation.

Finally, local language adaptations were made to ensure that the curriculum was culturally appropriate. For example: the local terms for the male and female reproductive organs were used instead of the formal/direct names, the term "period" was preferred over menstruation (*"werhawi tsigiya"* in Tigrinya) and taboo words were initially avoided. Furthermore, the Tigrinya spoken in different parts of the region can have a different meaning so it was important to select the terms used during the sessions carefully, to prevent cultural barriers for displaced participants from Western Tigray.

In **Benishangul Gyumuz** minor adaptations were made to the original curriculum. Facilitators allocated extra time for discussions on child marriage and gender-based violence, as these were identified as urgent concerns within the refugee community. The interactive peer-to-peer approach proved highly effective, fostering a safe and supportive learning environment where adolescents felt comfortable discussing their challenges. To better address the needs of refugee adolescents, additional activities such as songs, drama and storytelling were introduced to enhance engagement and make the learning process more relatable. These creative elements helped adolescents to internalise key messages and facilitated open discussions, particularly on sensitive topics like puberty and sexual health.

In **Oromia**, the curriculum was adapted to the context in Borena Zone. The programme incorporated cultural sensitivity by aligning content with local customs. For example, the use of sexually explicit words such as describing sexual organs and practices directly with their names (as written in the PALS manual) were considered taboo in the community. Thus, culturally acceptable expressions were used while delivering content related to sexuality.

The curriculum also addressed context-specific challenges, including the effects of drought and food insecurity, including the increased risks of child marriage. Facilitators incorporated localised examples into discussions on family dynamics and gender-related issues to make the content more relevant and engaging for participants. New topics were included in the curriculum such as managing emotional distress during humanitarian crises and building resilience within families facing drought-induced hardships. This was made possible by expanding existing sessions in the PALS curriculum in consultation with participants. Sessions were translated into local languages such as *Oromiffa* to enhance communication and comprehension. These modifications aimed to ensure that the curriculum resonated with the life experiences of adolescents and their parents/caregivers and equipped them with practical tools to navigate their challenging environment.

Training of PALS facilitators

PALS facilitators were Plan International staff (e.g. youth development officers or child protection officers), as well as facilitators selected from the local communities such as older adolescent peer leaders and trained community volunteers. In all locations, PALS Life Skills and Parenting facilitators were provided with five-day Training of Facilitators training to ensure high-quality programme delivery. Training covered key life skills and parenting content such as SRHR, child protection, gender-based violence and adolescent development. The training also offered opportunities to practise facilitation skills with attention to behavioural change and strategies to influence norms within the communities positively. The training also included trauma-informed approaches and psychological first aid (PFA) to help facilitators to create a safe space and engage safely with adolescents and caregivers who had experienced violence, displacement and loss. Plan International Ethiopia also ensured that facilitators were equipped with PALS monitoring tools, learning materials, and resource guides.

IMPLEMENTING PALS

PALS Life Skills sessions

In **Tigray**, the programme was initially carried out according to the contextualised curriculum of 17 Life Skills sessions and 10 Parenting sessions. Due to the unique challenges of the post-conflict humanitarian context, some adaptations were made during implementation to better meet the needs of participants. Following feedback from the community, the child protection project team made a few changes. Additional psychosocial support was provided within and alongside sessions, recognising the severe psychosocial distress which many adolescents experienced due to displacement, exposure to violence and family separation. Additional games and creative exercises from the Laughter and Play manual were incorporated to help adolescents relax, feel comfortable in the group and cope with distress, especially for those who had experienced extreme violence or who had been associated with armed groups previously. At the end of the programme, participants received a certificate and recognition during an end-of-programme ceremony, which helped boost engagement and encourage continued participation.

In **Benishangul Gumuz**, the PALS programme was implemented as per the contextualised curriculum. Sessions were scheduled twice a week and all PALS life skills sessions were conducted over a period of two months. Initially, it was a challenge to ensure continued engagement from adolescent boys in the sessions. To address this, targeted awareness campaigns and tailored discussion sessions were introduced, emphasising the importance of their participation in the sessions.

In **Oromia**, the Life Skills sessions were delivered according to the contextualised PALS curriculum, with weekly sessions implemented.

PALS Parenting sessions

Similar to the adolescent Life Skills sessions, most Parenting sessions followed the contextualised curriculum. However, during programme implementation, additional adaptations were made to meet the needs of participants.

In **Tigray**, additional adjustments were made during programme implementation to address the specific needs of parents and caregivers in the post-conflict setting. Many caregivers were struggling with stress, grief and financial hardship, which affected their ability to engage in positive parenting practices. Additional sessions on coping mechanisms, conflict resolution and stress management were introduced. These sessions were particularly important for caregivers of unaccompanied and separated children, survivors of gender-based violence and foster parents caring for unaccompanied and orphaned adolescents. The changes ensured that caregivers were better equipped to provide emotional support to their children, while also learning practical skills for managing household challenges in a crisis setting.

In **Benishangul Gumuz**, some additional modifications were made to accommodate cultural sensitivities. Originally, the parenting sessions were designed to be held with mixed gender groups. However, in practice, separate groups for mothers and fathers were formed to encourage more open discussions. Initially, it was a challenge to ensure continued engagement from male caregivers. To address this, targeted awareness campaigns and tailored discussion sessions were introduced, emphasising the importance of gender equality and positive masculinity.

Furthermore, new session content was included to strengthen positive parenting practices on supporting adolescent girls in accessing education and health services. Given the high rates of child marriage in the community, a session was held on the long-term consequences of child marriage. Additionally, facilitators observed that many parents lacked basic information on mental health and adolescent emotional well-being. In response, new

topics on how to support adolescents emotionally and recognise signs of distress were incorporated into the discussions. This adaptation helped parents develop stronger communication skills with their children, reinforcing the programme's long-term impact.

In **Oromia**, the PALS Parenting sessions also generally followed the PALS curriculum. However, they were slightly adapted based on participant feedback during programme implementation. In response to strong demand from participants, additional content focussing on gender-sensitive parenting, addressing early marriage risks and promoting positive discipline was also included. These adaptations helped address gaps in parental knowledge and provided caregivers with strategies to create more supportive and protective family environments amid the ongoing crisis.

Referral services

One of the objectives of the PALS programme is to link adolescents and their families to essential services, including more specialised services. In settings like Tigray, where the rate of sexual and gender-based violence was extremely high, it was critical to have safe and confidential referral pathways for programme participants with serious signs of distress or mental health concerns, children with protection concerns and adult survivors of gender-based violence.

At the start of the PALS programme, service mapping was conducted and referral pathways were established for adolescents and their parents/caregivers. Services were context-specific and included:

- Child protection/gender-based violence (GBV) case management services.
- Psychosocial support services.
- Cross-border family tracing and reunification (FTR) for unaccompanied and separated children.
- Education and vocational training programmes.
- Health, including adolescent-friendly SRH services, including menstrual hygiene support.
- Clinical mental health services.
- Food security and livelihoods programmes.

Monitoring and Evaluation

To track the progress and impact of the programme, Plan International Ethiopia implemented several PALS M&E tools. These included:

- Registration forms and attendance tracker to track participant participation rates.
- Pre- and post-surveys to measure knowledge and skills gained in PALS Life Skills and Parenting sessions.
- Session observation checklists to assess the quality of facilitation and participant engagement.
- Focus group discussions (FGD) and feedback surveys to collect feedback from participants and gather insights on the relevance and effectiveness of the sessions.
- Case studies and qualitative interviews with selected adolescents and caregivers to document personal experiences and challenges.

The monitoring data and participant feedback was used to make real-time programme adjustments, ensuring that sessions remained responsive to participants' evolving needs. Facilitators reviewed feedback regularly to determine which topics required more emphasis or adaptation. The post-test was used to evaluate the improvements gained by participants throughout the programme.

RESULTS

A total of 252 adolescents (131 girls and 121 boys) completed the PALS programme in Benishangul Gumuz, Oromia and Tigray in the reported period. Attendance rates were high across all regions; in Benishangul Gumuz, all adolescents completed the programme.

The PALS programme played a crucial role in supporting internally displaced adolescents and caregivers to overcome adversity. Key results were reported in relation to adolescents' psychosocial well-being, self-confidence and educational outcomes and strengthened parent-child relationships. In Benishangul Gumuz, over 75% of participants demonstrated improved knowledge of sexual and reproductive health, child marriage prevention and gender-based violence response strategies. Adolescents reported that they had gained more self-confidence, reconnected with peers and felt valued in their communities, particularly for those who had been displaced due to conflict. One of the participants indicated that PALS had been his pathway to reintegrating in the community after joining an armed force. Parents and caregivers improved their communication skills, reduced harsh discipline and improved their relationships with their children. Broader community-level benefits were also reported, including expansion of social support networks, improved community cohesion and increased community support for the protection, health, education and overall well-being of adolescents, particularly girls.

Psychosocial well-being

In conflict-affected **Tigray**, the most notable change was the improvement in the psychosocial well-being of adolescents. Many adolescents, especially those who had experienced severe psychosocial distress, reported increased confidence, emotional resilience and social reintegration. John (aged 15), a participant in the PALS Life Skills sessions, shared his transformation: "I stopped talking to other children because they pushed me away and excluded me. But with Plan's intervention, the bad attitude towards me has gradually changed. Now I have good friends and can easily play, study, and interact with children from both [host and IDP] communities". This reflects how the programme helped adolescents overcome isolation and stigma.

In **Oromia**, adolescents expressed greater confidence in navigating family conflicts and an increased awareness of gender-based violence and early marriage risks. Both parents and adolescents reported adopting more respectful and co-operative behaviour within the family, contributing to improved family dynamics despite the ongoing humanitarian crisis.

In **Benishangul Gumuz**, many adolescents reported increased self-confidence, better decision-making skills and stronger peer relationships. Following their participation in the PALS programme, many adolescents continued to be active in their community as peer educators and advocates. The interactive approach not only equipped young people with essential life skills, but also enabled them to take leadership roles within their community.

Parent-child relationships

In **Oromia**, the greatest success of the PALS programme was the significant improvement in parent-adolescent relationships, particularly within the context of a humanitarian crisis. By promoting open communication, mutual respect and conflict resolution skills, the programme helped foster more supportive and nurturing family environments. Parents reported feeling more empowered in their parenting roles, while adolescents expressed a greater sense of safety and belonging within their families. Moreover, the programme contributed to heightened awareness of gender-based violence and child marriage, encouraging both parents and adolescents to advocate actively for gender equality and child protection. This combination of strengthened family dynamics and increased community awareness has contributed to lasting positive change within the targeted communities.

Also in **Tigray**, the parenting sessions contributed towards strengthened family relationships, equipping caregivers with positive parenting skills, conflict resolution techniques and a better understanding of adolescent development. The PALS Parenting sessions were particularly effective for foster families, parents and caregivers of (reunified) unaccompanied and separated children, and other vulnerable children, many of whom reported improved communication and stronger bonds with their children, reducing household tensions and harsh disciplinary practices.

Male engagement

In **Benishangul Gumuz** and **Oromia**, the programme successfully engaged male caregivers in the PALS programme. Through targeted outreach, more fathers attended parenting sessions, leading to a shift in attitudes toward adolescent well-being and gender equality. In both regions, fathers and other male caregivers are traditionally less engaged in parenting of children. However, the programme saw many fathers actively participating in the PALS parenting discussions and applying learned skills at home. This contributed to more balanced family roles and enhanced shared responsibility for adolescent care.

Social relations

In **Tigray**, a notable outcome was the strong sense of peer support and solidarity among adolescents. Many participants, who initially struggled with social reintegration due to stigma or psychosocial distress, began forming support networks which extended beyond the programme. This was especially evident in the case of John, a 15-year-old adolescent boy, who initially faced exclusion but later became a role model within his community.

> *"I have faced many challenges in my life, but the support I received from PALS has completely changed me. Now, I am strong enough to overcome any obstacles and pursue my dreams through education ".*
>
> - John, PALS Life Skills participant

In **Benishangul Gumuz**, two adolescent girl participants were so inspired by the programme that they created PALS advocacy songs and dramas to raise awareness in their community. Their efforts led to the formation of Mini-Media Clubs, which continue to engage peers in discussions on life skills and behavioural change.

In **Oromia**, the programme fostered a stronger sense of community cohesion. Parents and adolescents began sharing parenting strategies and mutual support, leading to informal peer support groups. Another notable shift was parents' and adolescents' heightened awareness of harmful gender norms, which led some participants to challenge practices like child marriage within their communities. These outcomes extended the programme's impact beyond individual households, fostering broader community-level change and contributing to improved protection and well-being for adolescents.

Child protection and SRHR

In **Tigray**, the PALS programme contributed towards reducing harmful practices such as child marriage and child labour, particularly among adolescent girls. Plan International Ethiopia Joint Community-led Participatory Child Protection Risk Assessment in Tigray found that adolescents who participated in the sessions were more aware of their rights and had the confidence to advocate for themselves. However, the assessment also highlighted ongoing risks in communities, including sexual violence against girls and women perpetrated by armed groups. The life skills sessions provided adolescents with critical skills for decision-making, communication and problem-solving. The introduction of adolescent clubs, such as art, music, sports and sexual and reproductive health (SRH) groups, after the PALS programme provided adolescents with a platform to continue to express themselves, build confidence and develop leadership skills.

Unexpected outcomes

In **Tigray**, an unexpected outcome of the PALS programme was its positive impact on adolescents' performance in school. Many displaced adolescents who participated in the PALS programme had educational gaps and had only recently returned to school. All PALS participants who were integrated into host community schools advanced to the next level successfully, with some ranking among the top-performing students. Among them, 23 students (10 girls, 13 boys) ranked first to third in their respective classes, and they were awarded scholastic materials, dignity kits and other non-food items (NFI) to encourage their continued education.

Another unexpected outcome was the high demand for the programme. Due to its success and visible impact, many community members expressed interest in scaling up the PALS life skills and parenting sessions to reach more adolescents and caregivers. The facilitators and community social workers reported that caregivers who had completed the sessions began advocating for the programme within their communities, encouraging others to adopt positive parenting practices.

In **Benishangul Gumuz**, the high level of enthusiasm among adolescents in using creative methods like music and drama to share what they had learnt was an unexpected success. Inspired by the sessions, some adolescents formed Mini-Media Clubs to raise awareness of gender equality and life skills topics within the refugee community. Recognising the potential of this initiative, the programme provided additional support to formalise these clubs, making them a sustainable platform for peer advocacy.

In **Oromia**, the programme had broader community-level benefits, including the expansion of social support networks and increased parental involvement in supporting adolescents' health, safety and education beyond the PALS programme. There was also an uptick in referrals to health and protection services, reflecting growing community awareness of available resources.

CHALLENGES AND LESSONS LEARNT

Community acceptance

In **Benishangul Gumuz**, despite the contextualisation of PALS, facilitators encountered cultural resistance to discussing topics related to sexual and reproductive health and rights (SRHR). Initially, some parents and community leaders were hesitant to support discussions on puberty, menstruation and pregnancy prevention. To address this, the facilitation team engaged community elders and religious leaders in pre-session dialogues, helping them to understand the importance of life skills education for adolescents' well-being. Their endorsement helped to ease concerns and increased acceptance of the programme.

Financial means

In **Tigray**, budgetary restrictions affecting programme logistics, including the procurement of sufficient training materials, refreshments and other incentives for participation. The team responded by securing additional funding and leveraging local resources to keep the programme running effectively. Moreover, due to lack of financial means, some of the programme adaptations at regional level were made *ad hoc* and have not yet been integrated into a standardised, regionally contextualised curriculum.

Mental health needs

In **Tigray**, some adolescent boys initially showed low engagement due to past experiences of extreme violence and stigma, particularly adolescents formerly associated with armed groups. A more personalised approach, including one-to-one psychosocial support was introduced to support their well-being and encourage their participation in the programme.

RECOMMENDATIONS

1. **Develop a sustainable strategy to scale up the PALS programme:** mobilise resources to scale up the PALS programme with quality across multi-sectoral programmes to meet the high needs among adolescents and their families. Consider mobile approaches in insecure or remote areas, i.e. programme delivery by mobile teams who provide roving support in hard-to-reach areas.

2. **Promote localisation:** While the programme successfully recruited and trained facilitators, the initial shortage of skilled candidates limited its reach in some areas. Expanding training opportunities for local community volunteers and teachers would ensure greater long-term impact. Additionally, introducing more flexible, community-led sessions could also enhance the accessibility and flexibility of the programme.

3. **Support other organisations to adopt the PALS programme:** strengthen the capacity of local and national NGOs and other humanitarian organisations to scale up the programme and meet needs in locations where Plan International does not have a direct presence.

4. **Develop a contextualised PALS curriculum for each region:** mobilise resources to develop a standard, contextualised PALS curriculum for each region in which the local adaptations and contextualised components are integrated and explained. Promote regular learning and experience sharing across regions.

5. **Develop a community engagement strategy for local ownership and male engagement:** Design and implement a community engagement strategy to socialise the programme prior to implementation. Involve community elders and religious leaders from the start to create ownership and address cultural sensitivities and engage them as champions to advocate for programme messages and increase participation. Design specific male engagement strategies to promote the involvement of male caregivers in the programme.

6. **Provide essential services for adolescents alongside PALS:** Alongside PALS, offer adolescent-friendly services and critical intervention such as structured psychosocial support (PSS) such as individual counselling or peer support groups for adolescents and parents to provide ongoing emotional support beyond the PALS programme, child protection case management, adolescent-friendly SRH services and vocational training and livelihoods opportunities (financial literacy, income-generating activities) for adolescents and their families.

7. **Document and scale up adolescent-led initiatives:** Document successful adolescent-led advocacy and peer learning such as the Mini-Media Clubs, and explore how they can be replicated in other communities affected by humanitarian crisis.

8. **Create same-sex PALS Life Skills and Parenting groups:** create same-sex groups to promote meaningful participation and a safe environment for discussions on sensitive topics. Identify opportunities for mixed-group sessions between girls and boys and female and male caregivers to promote mutual learning.

9. **Digitalise monitoring and evaluation tools:** use digital technologies such as KOBO Toolbox for data collection and analysis.

10. **Provide certificates at the end of the PALS programme:** providing certificates can promote participation and programme completion and forms an important reward for adolescents and caregivers in settings where learning opportunities are limited.

About Plan International

Plan International is an independent development and humanitarian organisation that advances children's rights and equality for girls.

We believe in the power and potential of every child but know this is often suppressed by poverty, violence, exclusion and discrimination. And it is girls who are most affected.

Working together with children, young people, supporters and partners, we strive for a just world, tackling the root causes of the challenges girls and vulnerable children face. We support children's rights from birth until they reach adulthood and we enable children to prepare for and respond to crises and adversity. We drive changes in practice and policy at local, national and global levels using our reach, experience and knowledge.

For over 85 years, we have rallied other determined optimists to transform the lives of all children in more than 80 countries.

We won't stop until we are all equal.

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