Ado Avance Ensemble

A partnership where adolescents in West and Central Africa shaped their voice, their health and their future.

youth leadership

Rutgers

Adolescents are brimming with potential

Young people are the present – and the future – of West Africa and Central Africa. They are the majority, yet many - especially adolescent girls - are still unable to make decisions about their own bodies and futures. Too often, this leads to unintended pregnancies, unsafe abortion and girls dropping out of school.

When adolescents don't have the accurate information - about their bodies, consent, relationships, or how to prevent unintended pregnancy, they are left without the knowledge they need to protect their health, safety and wellbeing.

But knowledge alone isn't enough. Restrictive laws, harmful norms that dictate how boys and girls should behave, and stigma can still stand in the way, making it difficult for young people to access services, seek support and shape their own futures.

Our partnership

The Ado Avance Ensemble partnership (2022-2025), funded by the European Union, supported adolescents (aged 10–19), particularly out-of-school girls, to change this reality.

The partnership worked in Benin, Burkina Faso, Cameroon, Ivory Coast and Togo and was led by a regional youth-centred consortium, consisting of ABBEF, ABPF, AIBEF, ATBEF, CAMNAFAW, DKT International, Ipas and Rutgers.[1]

Together we focused on three interconnected goals:

- improving adolescents' access to sexual and reproductive health and rights information and services.
- making health systems more responsive to adolescents' sexual and reproductive health needs.
- making political and social environments more supportive of adolescents' sexual and reproductive health and rights.

Central to Ado Avance Ensemble was the Mouvement d'Action Jeunes (Youth Action Movement). It positioned adolescents and young people not as observers, but as agenda-setters, leading decision-making, implementation, research and advocacy.

In 2025, an independent evaluation conducted by Results in Health (Netherlands) and Ici-Santé (Burkina Faso) assessed the impact and lessons. Here's what it found.

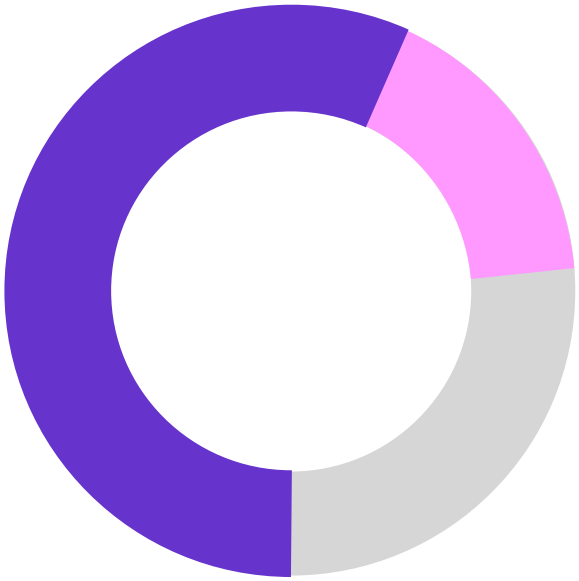
1 The full names of these organisations are Association Burkinabé pour le Bien-Être Familial (ABBEF), Association Béninoise pour la Promotion de la Famille (ABPF), Association Ivoirienne pour le Bien-Être Familial (AIBEF), Association Togolaise pour le Bien-Être Familial (ATBEF), Cameroon National Association for Family Welfare (CAMNAFAW).

What difference did Ado Avance Ensemble make?

Ado Avance Ensemble showed that when adolescents are informed, supported and listened to, change accelerates. Attitudes shift, services become more responsive, policies evolve and a generation gains the confidence to shape its own future.

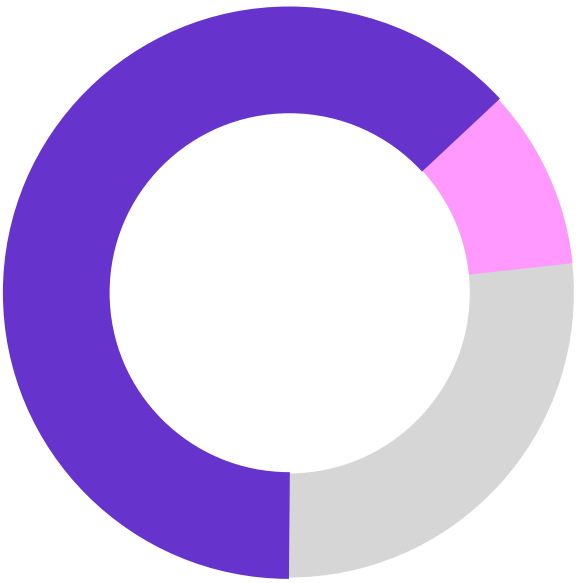
Over three years, adolescents and their allies across the five countries achieved measurable and meaningful change.

Adolescents participating in the programme became:



more confident in making decisions about their sexual and reproductive health:

- **79%** had increased agency to make SRH choices
- **55%** at the programme's start



more supported by their families and communities:

- **79%** described their environment as supportive
- **69%** at the programme's start

better served by SRH services:

32%
were satisfied with the SRH healthcare they received

23%
at the programme's start

During the programme, the adolescent birth rate (15–19 years) across the five countries fell from 111.12 (2023) to 88.6 (2025), according to WHO and UNFPA statistics. This change cannot be directly attributed to our partnership but is reflective of wider change that we contributed to.

Behind these numbers lies a deeper shift: adolescents are becoming informed, active decision-makers, increasingly able to make decisions about their own bodies and futures.

How our partnership got these results

We reached millions of adolescents, online and offline

Over three years, Ado Avance Ensemble reached 8.8 million adolescents and young people with relationship and sexuality education and information.

Of surveyed adolescents:

82%
had received CSE by the end of the programme

49%
when the programme began

Because we were guided by adolescents' realities, we provided access to education in and out of school, tailored to different needs. By the end of the programme, adolescents in school had gained stronger knowledge on topics like menstrual hygiene, puberty and how to discuss these and related topics with a family member. While adolescents not in school gained stronger knowledge on avoiding an unsafe abortion and sexual gender-based violence.

We shared information both face-to-face and online, making sure each approach reinforced the other. We used social media, where many adolescents already spend their time and look for answers.

This approach made a clear difference. Many more adolescents began using online sources to access information about their sexual and reproductive health and rights. Overall access to online information more than doubled during the programme.

We trained thousands of young educators to share accurate, age-appropriate information in ways that truly engage adolescents. To support them, we also developed a practical toolkit - now available for any educator working to improve young people's sexual and reproductive health and rights.

"I remember a young girl who came to my health clinic. I lectured her and sent her away and she never came back. Later, I heard that she had undergone an unsafe abortion.

It broke my heart that I had treated her this way. After the training, I learnt to change my behaviour towards young people and to treat them more friendly. I will never send someone away again."

– Mounaya, a midwife in southern Benin

We helped make services youth-friendly

Information alone is not enough. Adolescents need services they can trust.

That's why we trained over 30,000 medical and non-medical staff to provide youth-friendly sexual and reproductive health services. The focus was not only on skills, but on attitudes – supporting providers to reflect on how they treat adolescents, respect confidentiality and respond to sensitive needs with care.

This has made a tangible difference. We referred more than 127,000 adolescents to services, with over 71,000 going on to access the care they needed, 60% of them were girls.

By the end of the programme, adolescents described services as more available, accessible and affordable and providers more welcoming, respectful and trustworthy.

Our partners worked to adapt a social accountability tool so adolescents could provide feedback on how youth-friendly their local services were. This helped providers improve care where it was needed most.

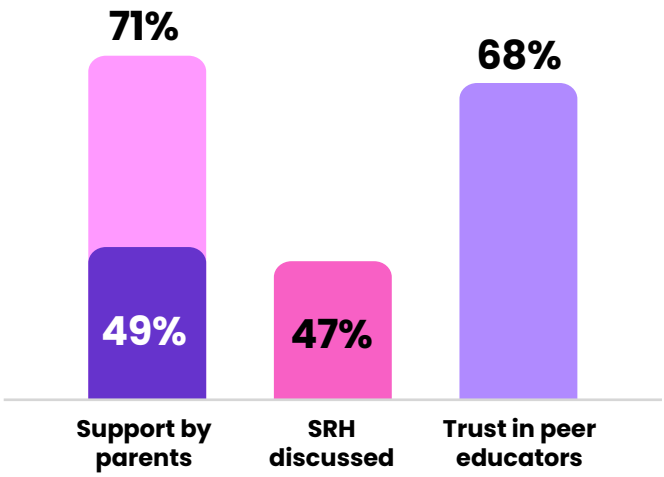
We also introduced digital referral systems and other innovative m-health solutions, including AI-supported tools, led by DKT International and Women First Digital. These innovations made it easier for adolescents, especially in urban areas, to access the services they needed

We worked with communities to change norms and attitudes

Having knowledge and access to services is only part of the puzzle. Adolescents may still hesitate to act if they fear criticism, shame or punishment for making choices about their sexual and reproductive health and rights.

That's why adolescents and their allies led community dialogues and training session, reaching hundreds of thousands of parents and thousands of influential figures, local authorities, religious leaders and youth leaders.

The results were clear:



among the adolescents we surveyed, 71% now reported having at least one supportive parent (up from 49%), 47% had discussed sexual and reproductive health topics with a parent in the past six months, and 68% described peer educators or youth influencers as trusted sources of information.

Parents also reported greater openness to discussing menstruation, contraception and sexual and gender-based violence, and increased confidence in connecting their adolescent children to services.

We helped create the conditions for policy change

Across the region, we worked with over 2000 decision-makers to support adolescent sexual and reproductive health and rights.

Our partnership contributed to significant policy wins:

- **Cameroon:** lawmakers voted recommendations to align national laws with Article 14(2)(c) of the Maputo Protocol on reproductive rights, which commits to providing access to safe abortion in cases of sexual assault, rape, incest or when the pregnancy endangers the physical or mental health or life of the pregnant woman or foetus.
- **Benin:** the President signed a decree implementing the country's reproductive health law, specifying the conditions for providing safe abortion care.
- **Burkina Faso:** The Ministry of Education piloted sexuality education in seven regions, a first step toward integrating it into schools nationwide.

These policy shifts did not happen in isolation. Young people led advocacy efforts within countries and regionally. Adolescent voices anchored discussions in their lived experiences and ensured policies met their actual needs. Their voice contributed to powerful movements like the Organisation pour le Droit à l'Avortement Sécurisé (Safe Abortion Rights Organisations) and the West and Central Africa Commitment for educated, healthy and thriving adolescents and young people.

We invested in research to continuously improve our evidence-based approach. Working with young researchers, CERRHUD[2] and Rutgers co-led a landmark study, The Maze Women Face, which highlighted how gaps between rights and reality endanger women and girls across West Africa and Central Africa. Launched at the International Conference on Family Planning 2025, the study revealed how stigma prevents survivors of sexual violence from accessing safe abortion services – even where it is legal – and was the first to link sexual violence and unsafe abortion across both regions.

2 Centre de Recherche en Reproduction Humaine et en Démographie

What made the difference?

Our partnership was relevant and effective across each of the five countries and delivered tangible improvements in adolescents' sexual and reproductive health and rights.

We achieved this by:

- collaborating with ministries of health and education
- aligning with existing national and regional initiatives
- investing in peer educators and youth leadership
- strengthening organisational and individual capacities
- supporting health system reforms and accountability mechanisms
- adapting to shifting socio-political contexts.

Adolescent voices anchored discussions in their lived experiences and ensured policies met their actual needs

How we can keep making progress

The partnership revealed critical lessons that can guide future action. Among these insights: peer education remains a powerful way to reach and support adolescents, while meaningful youth participation is essential to building trust and credibility.

Change also happens faster when communities are engaged and supportive and when collaboration with authorities strengthens legitimacy and long – term sustainability. At the same time, digital tools are critical for meeting adolescents in the spaces where they look for information. Private-sector partnerships can unlock innovation, even in constrained funding environments.

These lessons are not just observations; they point to what's needed to scale impact and sustain results.

Looking ahead

While Ado Avance Ensemble has ended, its foundations remain.

Sustained impact will mean building on what works. This includes embedding peer educator networks within national systems, strengthening youth-led regional coalitions and keeping young people at the centre of programme and partnership design, while continuing to engage parents and other key influencers. Integrated approaches that combine peer support, digital tools and quality services will be key to reaching more adolescents effectively.

The partnership also highlighted important lessons for the future. Strong baseline research and evidence gathering is essential to understand adolescents' realities, while ongoing risk monitoring helps protect young advocates. Working across sectors, especially with initiatives that support economic empowerment, will be critical to addressing the wider factors that shape adolescent wellbeing.

With the right investment and partnerships, these foundations can continue to grow. This will help ensure more young people are able to make informed choices, protect their health and shape their own futures.

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