Exploring Youth Participation in DREAMS Interventions: An Ethnographic Approach

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Introduction

An ethnographic qualitative study design was used. Methods of data collection combined: In order to comprehend the factors that influence young people's participation in DREAMS interventions, Group Discussions (GDs), longitudinal In-depth Interviews (IDIs) with adolescents and young people, IDIs with government stakeholders and DREAMS implementing partners, and rapid community mapping and observations were carried out in four communities one semi-urban (township) and three rural areas.

Methods of sampling young people who were the focus of DREAMS were chosen through homogeneous stratified purposive sampling. Local area individuals, government partners and DREAMS IPs were purposively examined.

• Participants were required to be able to give written informed consent (parents or guardians for participants under the age of 18).
• Adolescents between the ages of 10 and 24 for AGYW and 15 and 35 for ABYM.
• Residents of the study area for both groups.

The implementation of DREAMS or DREAMS-like interventions in the study area was one of the inclusion criteria for IPs. Mediations included, school-based life direction, peer support, HIV testing and therapy, willful clinical male circumcision (VMMC) and sexual and conceptive wellbeing (SRH) care. During the study period, each participant had to be available to participate [1].

Description

Tools and procedures for data collection a team of eight research assistants four men and four women along with the first author (TZ), who served as supervisor, developed and tested data collection tools, such as topic guides and an observation checklist, in two rural communities for two months. With all of the participants, various study tools were used to cover four areas: Understanding personal expectations, perceptions, and experiences of DREAMS and other similar interventions, as well as the experiences and perceptions of those who delivered interventions, the social context

for adolescents and young people, the reach and coverage of various health services for young people, and the team held regular debriefing meetings to discuss their experiences and consider whether the tools were appropriate for various age groups [2]. The tools were improved during this process under the direction of the final author (MS). All participants were instructed on the research process in their native isiZulu language during the recruitment process. From May 2017 to January 2020, 21 months were used to collect the data.

Comments from the community: The first and last authors, along with a team of research assistants, carried out mapping and observations to observe IPs' intervention activities and acquire a comprehensive comprehension of the social context for AGYW/ABYM and the scope of various interventions. In 2017, the team observed and actively engaged with the participants in the research through informal discussions in their neighborhoods and schools. Young people's interactions with various materials and interventions were documented using a structured observation checklist. The notes taken by observers were recorded to add to the checklist [3].

Discussions in groups: 2017 saw the completion of all GDs. We investigated assumptions, discernments about and encounters of SRH with the more extensive endlessly dreams type intercessions. Age was used to divide the AGYW/ABYM groups: Those who were in school (those who were younger) and those who were not in school (those who were older), so that they could participate in a way that was appropriate for their age. According to Kielmann, Cataldo and Seeley, GDs (AGYW/ABYM and community members) consisted of 4 to 8 individuals and lasted one to two hours in settings where participants naturally came together ('natural' group discussions), such as during daily social activities. GDs were also held in locations chosen by the researcher [4]. GDs collected DREAMS' experiences and perspectives as well as solicited a variety of perspectives on how the context affected the intervention. In order to learn more about parents and/or guardians' perspectives and engagement with DREAMS and other non-DREAMS activities in the setting, GDs were used. Interviews at long intervals: From 2017 to 2020, rehash IDIs were directed with youngsters (n=58, year 1; n=50, year 2; using a common topic guide to investigate how young people who were

targeted by DREAMS experienced and perceived the intervention (n=37 in year 3) [5].

Conclusion

IDIs took somewhere in the range of 30 and 60 min and were led in members' homes or different settings which gave protection. Calls or home visits were used to schedule subsequent interviews. The extended communication allowed for detailed descriptions of perceived factors that influence DREAMS engagement over time.

Interviews one-time: In 2017 and 2018, single IDIs with DREAMS IPs and stakeholders were carried out to investigate their experiences and perceptions. IDIs were carried out in the offices of participants and lasted anywhere from 30 to 60 minutes.

References

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