

Open call submission

INSTRUCTIONS

Join UNICEF, WHO, and UNAIDS to identify innovative solutions that will help to promote adolescent health and well-being in areas most affected by HIV!

Interested? Adolescents aged 10-19 years can submit ideas on their own but if you are older than 19 years, you must be in a team with an adolescent who is aged 10-19 years and the team leader should not be older than 30 years. Entrants who are 10-17 years old must have parental permission.

If you are interested, you can submit an application in one of the following ways by **July 15th 2023 at 11:59 PM US ET**:

Method 1: Online form submission

- Submission using the online form here: <https://bit.ly/Opencallonlinesubmission>
- Links to images, audio files, and video files can be embedded as hyperlinks in the text

Method 2: Email submission

- Download your offline submission form here: <https://bit.ly/opencallsubmission>
- Please send your filled submission form directly via Email:
thehealthyouthwant@gmail.com

- Images, audio files or video clips accompanying your text submissions can be forwarded as well. The submission should be titled with your first and last name (example: Uche_Chukwu)

Anyone is eligible to submit to this open call, but the solutions must focus on adolescent health and well-being in selected countries.

These countries include: Brazil, Cameroon, Côte d'Ivoire, Democratic Republic of Congo (DRC), Ethiopia, Kenya, Malawi, Mozambique, Nigeria, Philippines, South Africa, Tanzania, Uganda, Zambia, Zimbabwe

KINDLY NOTE THAT YOU ONLY NEED TO COMPLETE ONE APPLICATION FORM PER TEAM.

Be sure to read the open contest page on our website BEFORE you proceed with the submission form! If something is not clear, please contact us by **email at** thehealthyouthwant@gmail.com

Semi-finalists will be notified of their selection through email or phone call.

Note: All sections in the submission form are required unless stated otherwise.
Top ideas will win cash prizes up to **\$ 1,500** + other cool prizes!

APPLICATION IS FREE!

Your consent

By continuing any use of this website and by submitting an application to the contest you expressly consent to the Official Contest Rules and affirm that you are 10 years or older.

Agree

Disagree

Your consent

All adolescents who are 10-17 years old regardless of if they are submitting as individuals or as part of a team must have parental permission to participate in the contest. Kindly fill out the parental consent form attached below.

Signed parental consent forms should be submitted via email at thehealthyyouthwant@gmail.com along with this application form

I have completed and submitted my parental consent form

I do not need parental consent/no member of my team requires parental consent

Participant's detail Participant 1

Preferred title _____

First name _____

Last name _____

Email _____

Age _____

2 What is your sex assigned at birth / reflected on your birth certificate?

Male

Female

Another gender not listed above (Please specify)

Prefer not to say

3 What is the highest degree or level of school you have completed? If currently enrolled, highest degree received

No formal schooling completed

High school graduate, diploma or the equivalent (for example: GED)

- Bachelor's degree
- Masters or similar professional degree
- Doctoral degree

4 Do you currently have any mental or physical illness or disability that affects you in your everyday life? By affecting your life, we mean limiting your usual activities in any way.

- Yes
- No
- Prefer not to answer

5 Which of the following best represents how you think of yourself?

- Gay or Lesbian
- Straight, that is, not gay, lesbian, or bisexual
- Bisexual
- Other sexual orientations (e.g., pansexual, asexual, etc)

I am not sure of my sexuality (I am “questioning” my sexuality)

I am not sure what this question is asking

I prefer not to say

6 Main institution and affiliation if any

7 Country of residence

8 Is your submission from a single person/individual or a team?

Single person/individual

Team

Skip To: 12 If Is your submission from a single person/individual or a team? = Single person/individual

9 If submitting as a team, list additional team members:

Participant 2

Preferred title _____

First name _____

Last name _____

Email _____

Age _____

10 Participant 3

Preferred title _____

First name _____

Last name _____

Email _____

Age _____

11 Participant 4

Preferred title _____

First name _____

Last name _____

Email _____

Age _____

12 What is the title of your Idea or Innovation?

13 Which subcategory does your idea or innovation fall under?

Digital and Social innovations for health

Digital and social innovations that promote adolescent-centred processes, systems and policies

Social and behavioural innovations

Surprise us!

14 Have you prototyped, implemented or done research to support your innovation?

Yes

No

15 If there are reports or publications associated with your innovation, include links here:

16 Please state your personal role or contribution (if any) to the design, development, and use of this innovation.

17 If you are submitting certain aspects or parts of an existing innovation, please provide a URL to Google Drive or Dropbox of the existing innovation below. Alternatively, you may use the space below to provide an explanation:

18 How were adolescents (10-19 years old) involved in designing, implementing, or evaluating the innovation?

19 Anything else that we should know about your proposed idea? (Optional)

20 Would you/your team like to receive more information on the Open call as the contest moves forward?

Yes

No

21 Please be aware that all responses on this submission form will only be used for the purposes of this open call, not shared with others, and treated as confidential. We will, however, use aggregate information for purposes of research publication, marketing, and promotion of the call. Do you consent to this?

Yes

No

22 Please provide a URL to Google drive or Dropbox here that contains your submission. Kindly submit as .doc, .docx, or .pdf format. File sizes should not exceed 50MB and responses are limited to 500 words. You may include supporting documents and appendices. Alternatively, you may use the space below to describe your work in no more than 500 words:

23 Submit your image or video submission (other digital entries) to thehealthyouthwant@gmail.com

I have emailed my digital submission to thehealthyouthwant@gmail.com. The submission is titled with my first and last name (example: Uche_Chukwu)

I do not have any digital submission

24 How did you hear about the contest?

Facebook

Instagram

WhatsApp

Friend or Colleague

Blueprint Open call Ambassador or Jurist

Banner

Flyers

LinkedIn

Other (specify) _____

25 Did anyone refer you to apply? if yes, please write their name below

26 I affirm that this entry is my own (or my team's) original work and grant the sponsors permission to use my/our work in ways they deem appropriate (i.e. recognition, publications, promotions and websites).

I agree

I disagree

27 If my entry is selected, I understand that my team will be invited to participate in a launch event this October 2023

I agree

I disagree

Open Call Parental/Guardian Consent Form

Please read this consent agreement carefully.

Contest Title: TheHealthYouthWant Global Open Call

Organisers: UNICEF (United Nations Children's Fund), WHO (World Health Organisation), UNAIDS (Joint United Nations Programme on HIV/AIDS)

This consent contains important information to help you decide whether to allow your child/ward to participate in the thehealthyouthwant global open call. Please note the following:

- Being in this study is voluntary – it is your child's/ward's choice
- If your child/ward joins this study, your child/ward can still stop at any time
- If you have any questions about the study, please contact the contest team through thehealthyouthwant@gmail.com

After reading the information in this consent form you should know:

- Why this open call is being done
- What will happen during the study
- Any possible benefits to your child/ward
- The possible risks to your child/ward
- Other options you should choose instead of consenting to your child's/ward's participation in this study
- Whether being in this study could involve any cost to you
- And what to do if you have problems or questions about this study.

This consent form may contain words you do not understand. Please ask the contest team through email (thehealthyouthwant@gmail.com) to explain anything that you do not Understand.

Why is this open call being done?

The purpose of this crowdsourcing open call is to identify innovations that will help to ensure adolescent health and well-being in the coming decades in High HIV burden countries. Adolescents are individuals aged 10 to 19 years old and they continue to lag behind in our

struggle against HIV/AIDS globally. The submissions to this open call will help to inform our approaches to addressing challenges in adolescent health and wellbeing in the coming decade.

What is my child/ward being asked to do?

We are inviting your child/ward to give their ideas about how we can ensure adolescent health and well-being in the coming decades in High HIV burden countries.

Submitting an idea to the open call can be done via a form either online (in text or audio/video formats) or offline (in paper format). The submission form will require some demographic information such as age, gender and race, and a description of their idea in either format. They can submit either individually or as part of a team.

They will also be asked to provide their contact information and a member of our contest team will contact your child/ward if they are chosen as a finalist.

More information about the contest can be found on the contest website.

Who is eligible to participate in the open call?

Participation is open to anyone around the world though we highly encourage submissions from adolescents aged 10-19 years.

As your child/ward is age 17 years old or younger, they will need to first submit this parental/guardian consent form indicating your permission for them to participate in this open call regardless of whether they are submitting as an individual or in a group.

What are the risks to my child/ward?

Some of the foreseeable risks or discomforts of your child's/ward's participation include:

1) Potential feelings of obligation to participate in the open call. To reduce this risk, please note that your child/ward can withdraw from participating in this contest at any point with no penalty.

2) There may be a loss of confidentiality (your child's/ward's data being seen by someone who shouldn't have access to it). There is also a small risk that your child's/ward's name or identifying data may be disclosed if the data is lost or stolen.

To minimize this risk, all data we collect will be password protected or stored in a locked cabinet which only members of our contest team will have access to.

3) Some questions in the submission form may make your child/ward uncomfortable. Your child/ward does not have to answer questions that make you uncomfortable or any question they do not want to answer for any reason.

With your permission, we may use participants' names in presentations or publication of results from this open call. However, please note that we have to report some incidence as required by law. This includes suspicion of child abuse, elder abuse and the threat of imminent action on suicidal or homicidal ideation based on personal reports or reports from other participants. The contest team is willing to discuss any questions you might have about these risks and discomforts.

Are there benefits to my child/ward for participating in this open call?

\$1,500 and \$500 will be awarded to the winner and runner-up, respectively, of all four subcategories. Finalists may also have the opportunity to present their idea at the 2023 Global

Forum for Adolescents.

Your child/ward may not benefit directly from this contest. However, their participation in this contest will help create ideas and programs to improve adolescent health and well-being in high-burden HIV countries.

What are the costs and payments?

There are no costs to you or your child/ward for taking part in this open call.

Who can I call if I have questions?

If you have any questions or concerns about this open call or you have any problems that occur from your child/ward taking part in this open call, please contact the contest team at thehealthyouthwant@gmail.com.

Am sure that I understand?

I have read and understand the above consent form. I believe I understand the open call and the potential benefits and risks that are involved. Please select the option that applies.

- I consent and wish to have my child/ward enter the study.
- I do not consent and wish to not have my child/ward enter the study.

I indicate my willingness to allow my child/ward to take part in this contest by providing my name and today's date below:

Name:.....

Today's date: **Day** **Month** **Year**