







INTRODUCTION

At 1.25 billion, adolescents (aged 10 to 19 years) constitute about one sixth (16 %) of the world's population, with a higher proportion in middle- and low-income countries. This large number makes it crucial for countries to secure the health and well-being of this group in order to harness demographic dividends and to assure sustainable development. As a phase of accelerated growth and transformation, adolescence is characterized by a high need for sexual and reproductive health (SRH) services, a specific vulnerability to SRH violations as well as a need for information to assure the realization of SRH and rights of adolescents. Accelerating adolescent sexual and reproductive health and rights (ASRHR) is key to reducing rates of unintended pregnancies and thus enabling girls to reach their full potential, to challenge negative implications of prevailing social and gender norms and to diminish social and health risks for young women, men and people of diverse gender identities.

On 20 October 2021, more than 140 participants, experts, and speakers from 47 countries convened virtually in the fourth edition of the Government-Government Policy Dialogue series on Demographic Diversity and Dividend(s). The 4D Series, jointly organized by the African Union Commission (AUC), the United Nations Population Fund (UNFPA) and the Government of Germany builds on discussions launched in 2019 at the Nairobi Summit on ICPD25 around policies and practices that countries can apply in population and development planning.

Six breakout groups focused on current initiatives relevant to policy planning, on the lessons learned and on how to share these learnings with each other:

- Data gaps on ASRHR and why they matter
- Social and economic impacts of under-investing in ASRHR
- Making adolescent-friendly SRH services accessible to everyone, in all settings
- Preventing gender-based violence and harmful practices against young girls
- Youth-led policy advocacy and accountability
- Investing in youth capabilities and access to information

This booklet provides a brief account of the dialogue, aiming to inspire further discussions on the issues raised. It summarizes the views of a diverse group of stakeholders and features some country examples shared during the event. An input paper prepared to inform discussions is available at the following link: https://bit.ly/3uowWrK.



EXECUTIVE SUMMARY

In countries where adolescents account for a large share of the population, their empowerment and well-being are significant contributors to productivity and economic development. This makes high-quality ASRHR information and services an important lever for countries to benefit from demographic change and harness demographic dividends. ASRHR is a complex field of action that includes measures ranging from comprehensive sexuality education (CSE) and access to contraceptives to preventing gender-based violence and offering specialized health and consulting services for young people. In the opening segment of the event, it was made clear what all these measures have in common: the goal of enabling all adolescents to realize their aspirations and their full potential. Accelerating ASRHR means to support young people in their personal development, to autonomously determine their life trajectories, to enable them to flourish educationally and eventually also economically – for their own good as well as their communities' and society's as a whole.



The following section summarizes key action points suggested by the participants.

- Collect disaggregated and reliable data on ASRHR to be able to identify adolescents' needs, including those of marginalized adolescents who are typically in danger of being left behind.
- Ensure a continuous collection, analysis and use of data and improve the quality of data sets to recognize gaps in health service coverage and introduce integrated, tailored, youth-friendly services.
- Include adolescents in the data collection process to gain an understanding of their diverse experiences and of intersectional vulnerabilities.
- Train SRH service staff to be sensitive to the needs of adolescents, their diversity and their need for privacy.
- Develop formal evaluation and documentation methods to learn how SRH services can best engage adolescents.
- Enforce existing laws and policies against gender-based violence (GBV), such as the Maputo Protocol, at national levels.
- Include boys and men into the programmes; make them allies in the fight against GBV and for gender equality.
- Develop standards and guidelines for ethical and meaningful engagement, participation and leadership of young people.
- Foster ASRHR through investments in different sectors and acknowledge that education is key to foster development of girls.
- Mobilize public sector resources for ASRHR, for example by raising awareness for short- and long-term impacts of under-investing.
- Invest in the education and legislative literacy of young people so that they can hold their governments accountable.
- Reinforce and strengthen initiatives to ensure the implementation and promotion of sustainable and impactful advocacy on ASRHR.
- Create public awareness on CSE by supplying the right information and countering misinformation; establish common ground with the relevant communities.
- Communicate information in a way that appeals to young people and invest in the right digital tools to reach out to them.

This booklet uses the term SRHR according to the comprehensive definition provided by the <u>Guttmacher-Lancet Commission</u>.



Disaggregated data is a prenequisite for providing high-quality ASRHR services. Programmes need information on adolescents' socio-demographic characteristics and living conditions, their health, their health seeking behaviour, the perception and impact of gender norms and gender attitudes, and accessibility of SRHR services. Without them, programmes cannot ensure that their services respond to young people's actual needs and adequately consider their diversity and intersectional vulnerabilities. Yet, this necessity contrasts with the large data gaps that exist in this area, with severe consequences: needs remain unnoticed, measures unevaluated and policies uninformed. Furthermore, data can be a powerful tool, for example to demonstrate the impacts of under-investing in ASRHR to decision makers and thus encouraging a more appropriate allocation of resources. Not having this data will eventually manifest itself in a lack of targeted, high-quality ASRHR services – and thus in missed opportunities to realize demographic dividends.

U-Report is an open-source mobile messaging programme launched in 2011 and managed at the country level by UNICEF alongside youth and NGO partners. It works with various instant messaging services. By gathering opinions and information from young people, U-Report gives them a voice on issues that matter to them, for example on issues related to sexual and reproductive health, HIV/AIDS prevention, early marriage or gender-based violence. The collected real-time data and insights are shared with communities and policymakers who take decisions that affect young people. An additional component of U-Report is the counselling service. Registered users can send in their questions and receive answers by trained youth counsellors – confidentially and free of charge. As of January 2021, U-Report is active in 76 countries worldwide, with 12.8 million U-Reporters all over the world.

Participants of the breakout group "Data gaps on adolescent SRHR and why they matter" took a close look at the reasons for data gaps. One of the prominent reasons is the common myth that collecting disaggregated data on ASRHR – which necessarily includes talking to adolescents about sexual and reproductive issues – will encourage sexual activity among young people. Moreover, vulnerable groups are often excluded from national statistical data (e.g. refugee communities) and ASRHR is treated mainly as an issue for female adolescents. The discussions emphasized that closing these data gaps is a precondition for evidence-based policymaking, as only a thorough and comprehensive understanding of adolescents' diverse needs can provide a sufficiently nuanced view to inform policies. To achieve this, participants highlighted the need for a holistic approach that includes adolescents throughout the entire data collection process. Furthermore, participants widely agreed that intragovernmental disagreement on ASRHR issues and lack of cross-sectoral cooperation are common barriers to data collection in this field.



Implementers on the ground face many challenges in collecting disaggregated data. This comes from restrictions that some countries have placed on adolescents or 10- to 14-year-olds accessing SRH services. Moreover, adolescents may not be truthful about their ages due to stigma in accessing SRHR services. We keep talking about 10- to 14-year-olds, but how are we supposed to help them if we cannot get near them and record their information? The necessary systems and processes are not in place.

Anisa Berdellima, Global Director of Evidence and Impact, MSI Reproductive Choices

In Eswatini, the Eswatini Client Management Information System (ECMIS) enables health workers and policymakers to collect and access disaggregated data on SRH, particularly on sexually transmitted infections (STIs) such as HIV/AIDS. With such data, a new evidence base is made available that constitutes an important step towards integrated health services for clients. This is a crucial element for ensuring the health and well-being of everyone, including adolescents. The ECMIS programme includes the development of the first national electronic medical record system. This system allows for better tracking and care for HIV-positive and -negative patients, to give patients a comprehensive picture of their health information and to consolidate and interpret data for SRH providers and public health decision makers. A key goal of the US-AID-funded ECMIS programme is the advancement of the country's epidemic control objectives and reaching its vision of an AIDS-Free Generation by 2022.

The lack of disaggregated data is only one reason why countries do not prioritize investments in adolescents' education and health. Participants of the breakout group "Social and economic impacts of under-investing in ASRHR" discussed the detrimental effects that a lack of financial, organizational and communication resources have on the health and well-being of young people and women. Overall, there was wide agreement that ensuring sufficient funding for ASRHR is a tremendous challenge, and that COVID-19 has exacerbated this shortage. Yet, as highlighted by various examples provided by participants, the gains from investing in ASRHR outweigh the costs. This is true not only for the health sector — as access to ASRHR services is associated with decreased rates of child marriage, gender-based violence and teenage pregnancies — but also for the economic sector. Participants emphasized that this economic gain — caused by higher rates of school completion rates and increased access to labour markets especially for young women — needs to be used as leverage in convincing decision makers to allocate public resources to ASRHR and to invest in adolescent education.

In 2015, the SWEDD regional initiative came into being resulting from a call made by the six Sahel countries, Burkina Faso, Chad, Côte d'Ivoire, Mali, Mauritania and Niger. The initiative, financed by the World Bank and receiving technical assistance by UNFPA, aims to increase women's and adolescent girls' access to SRH services and to foster and share knowledge and coordination on a regional level. Its comprehensive approach fosters SRHR at various levels: among others, it addresses social norms, works with religious leaders, fosters economic empowerment of women, invests in reproductive health commodities and includes boys and men in female empowerment.

The initiative has contributed to highly promising trends across member countries, during the 2015-2019 phase, among others in:

- girls' education: school retention rate of adolescent girls enrolled in secondary schools increasing from 70 % to 93.43 %.
- family planning: the modern contraceptive prevalence rate increased from 9 % to 17.5 %.
- maternal health: the average maternal mortality rate decreased from 606 to 558 deaths per 100,000 live births.

Due to its notable success, six more countries joined the initiative in 2019 for SWEDD II: Cameroon, Guinea Conakry, Madagascar, Senegal, the Gambia and Togo.



2. REALIZING HEALTH AND RIGHTS: ENSURING YOUTH-FRIENDLY SERVICES AND FIGHTING AGAINST SEXUAL AND GENDER-BASED VIOLENCE

Youth-friendly services are key in order to address and meet young people's specific SRHR needs. Services must be comprehensive and respond to the specific needs, desires and vulnerabilities of young people. It is essential that no one is left behind, that services are accessible to everyone and that adolescents feel safe and respected when making use of them. Only if this is guaranteed, all young people will have the chance to realize their rights, take decisions regarding their lives autonomously and reach their full potential. In light of the COVID-19 pandemic, the lack of youth-friendly services has become even more evident and access has deteriorated throughout this time. Youth-friendly SRH services should target topics such as family planning or contraception, but also provide information on early marriages, unintended pregnancies and unsafe abortions. Furthermore, many young people are exposed to sexual and gender-based violence (SGBV). Therefore, it is central to raise awareness and educate adolescents on this issue and grant them access to services addressing the physical and mental repercussions of SGBV.

In 2009, the African Union Commission launched the Campaign on Accelerated Reduction of Maternal Mortality in Africa (CARMMA) under the theme "Africa cares: no woman should die while giving life". Among other means, the initiative provides educational material, organizes high-level forums, advances data collection processes and helps to synchronize actions and efforts of participating states. The overall goal is to end all preventable maternal deaths by 2030. Currently, the African Union Commission is working on launching a re-strengthened CARMMA campaign for the 2021-2030 period; the upcoming project cycle features a specific focus on adolescent health.

The cultural practices that affect men or boys, they are easy for community members to let go.
But the ones that affect women remain a huge problem. It also sticks to the fact that gender is still a very big problem. Patriarchy is still a very big problem. Men's and boys' issues are everybody's issues. But girls' and women's issues are women's issues.

Abimbola Aladejare, African Union Saleema Youth Victorious Ambassador for West Africa Public Health, Stellenbosch University, South Africa

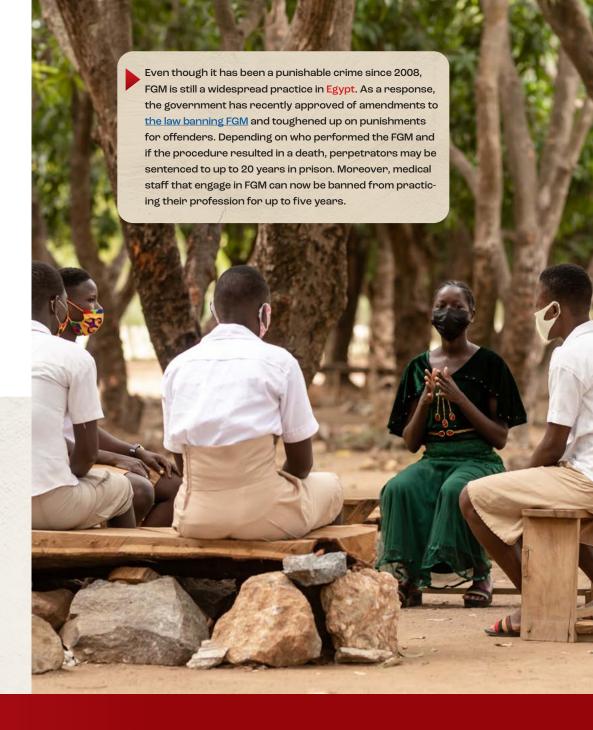


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The breakout group "Making adolescent-friendly SRH services accessible to everyone, in all settings" agreed that multisectoral programmes which put adolescents at the centre are key to engage and equip them with quality information on SRH. Youth-friendly and prejudice-free services should acknowledge the diverse and intersectional needs of adolescents and offer a welcoming and respecting setting for all young people. To ensure this objective, programmes need highly trained staff as well as feedback mechanisms and evaluation systems that document progress and identify gaps.

Many adolescent girls and young women are subjected to SGBV despite the considerable number of protective frameworks and policies that have been passed at the regional level. Traditional and cultural beliefs often cause girls to have limited access to education and put them at risk of child marriages, adolescent pregnancies and female genital mutilation (FGM). The breakout group "Preventing gender-based violence and harmful practices against young girls" tackled the questions of how to close gaps in the implementation of policies and how to make education a means to overcome the harmful effects of traditional and cultural beliefs. The group put special emphasis on the need to empower survivors of FGM and SGBV to speak up about their experiences so that they can become advocates in the fight to end these harmful practices, raise public awareness on the topic and challenge decision makers to implement harsher penalties for perpetrators. The breakout group highlighted that programmes should be gender-sensitive and should also address boys and men, encouraging them to become allies in the fight against SGBV and FGM.

FGM was banned in Burkina Faso in 1996 and was further criminalized with the 2018 amendments which stiffened penalties for perpetrators. Furthermore, the government introduced three National Action Plans as well as a National Strategic Plan to promote the elimination of FGM. It also committed to include education about FGM into school curricula. These measures were supported by the UNFPA-UNICEF Joint Programme on Female Genital Mutilation/Cutting: Accelerating Change. The initiative has proven to be successful: it allowed to bridge the gap between policies and action and resulted in the conviction of 384 perpetrators of FGM. Furthermore, 518,203 women and girls were reached by services related to FGM between 2009-2016, including the management of the effects of FGM, educational sessions at school level and community dialogues focusing on prevention.





3. UNLEASHING THE POTENTIAL OF YOUTH: INVESTING IN YOUTH-LED POLICY AND ADVOCACY AND PROVIDING ACCESS TO INFORMATION

The costs of inaction towards investing in youth capabilities and access to information especially among adolescent girls and young women are significant. Not only do these costs impact girls' lives and well-being, but they also undermine the prospects for poverty reduction, growth of communities, and resilience of families.

Gloria M Nalule, Programme Analyst, SRHR/HIV Linkages and HIV Prevention, UNFPA

True inclusivity can only be achieved if those targeted by ASRHR services are involved in the political processes. Young people oftentimes have insufficient knowledge of policies, commitments and frameworks, which results in only a small number of adolescents critically scrutinizing the policies that affect their everyday lives or holding politicians accountable for their rights. Access to education and information plays a major role in ensuring young people's meaningful engagement and in helping them make independent decisions about their SRHR.



The breakout session "Youth-led policy advocacy and accountability" discussed how to engage young people in political processes and how to ensure that these processes are designed to accommodate the ideas provided by adolescents. The group noted that it is particularly important to set and institutionalize minimum standards and guidelines for the development sector on the ethical and meaningful engagement, participation and leadership of young people that can become advocates for their peers around their country. This includes the creation of a special department in ministries, where young people can voice their concerns, and the involvement of parliamentarians on local and regional levels.

To ensure the sustainability of youth involvement, governments should provide access to information and training along with documenting good practices of youth engagement that can be used as guideline for other countries and serve as quality evidence to keep governments accountable.

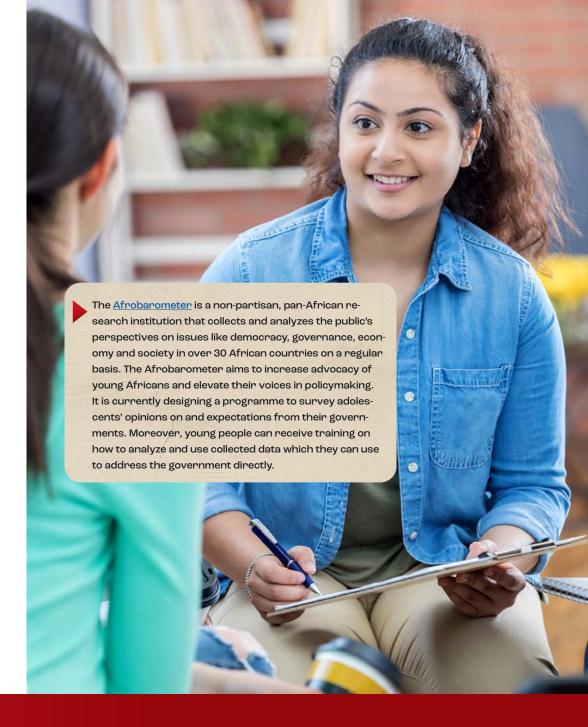
- When the government of Botswana changed the age of sexual consent from 16 to 18 years, young people were at risk of being criminalized for consensual sexual activity. Youth activists in Botswana successfully advocated for the inclusion of a close-in-age provision that allows for consensual sexual activity among young people an act of decriminalization that also unblocked their access to SRHR services and information.
- An increasing number of youth-friendly centres in The Gambia were established as a key result of the government's National Development Plan, in which youth empowerment and development were identified as strategic development priorities. These centres serve as platforms for engagement and empowerment of young people and offer different activities, such as entrepreneurship activities, sports, social events as well as information and education services.



The breakout session "Investing in youth capabilities and access to information" highlighted the importance of involving and educating different stakeholders such as policymakers, parents, religious actors and young people on CSE. This is necessary in order to provide quality information that is accessible to everyone – and to ensure that CSE is supported by the relevant communities. Strategies that were discussed included investing in the training of young people to provide peer-to-peer counseling as well as offering relevant information to parents so that they become allies in CSE provision.

One of the key challenges is the high prevalence of distorted information on CSE. As a response, it is essential to make factual information on CSE accessible and raise awareness on the importance and positive impact of CSE. While it is essential to use digital tools and communicate information in a way that appeals to young people, it is important to also provide information to adolescents who do not have access to the internet. Moreover, governments need to acknowledge the economic impacts stemming from the realization of ASRHR. Accordingly, they should provide public funding to scale up CSE initiatives as well as options for young people to actively participate in their development and implementation.





CONCLUSION

By investing in high-quality, inclusive ASRHR, governments are creating necessary conditions to harness demographic dividends. Ensuring access to relevant data, developing innovative education programmes, investing in youth-friendly services, enforcing and strengthening existing laws and policies, and encouraging youth advocacy and political involvement are but some measures for guaranteeing young people their SRHR. The impacts of investing in ASRHR are manifold and go far beyond the health and well-being of individuals: Access to ASRHR enables young people, and especially girls and young women, to reach their full potential and thus contribute to the social and economic development of societies as a whole.





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