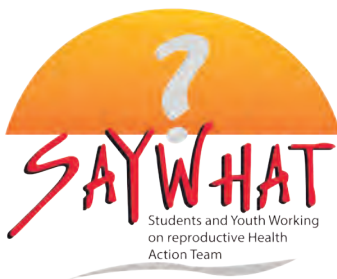


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YOUNG PEOPLE AT THE ADVOCACY FRONTLINE



A case study of
SAYWHAT's
youth-led approach to ASRHR

Introduction

Young people, a collective group of adolescents aged 10 to 19 and youth aged 15 to 24, are faced with a myriad of reproductive health (RH) challenges globally. These challenges consist of risks of HIV infection and other Sexually Transmitted Infections (STIs), unintended pregnancies and unsafe abortions.

Adolescents in Zimbabwe, as in many parts of Southern Africa, have inadequate knowledge and information on Sexual and Reproductive Health and Rights (SRHR). Adolescence, defined as the period between 10 and 19 years of age, is associated with a multitude of developmental changes, during which adolescents need to be well informed about their adolescent sexual reproductive health and rights (ASRHR). Moreover, the taboo and negative social perceptions about adolescent sexuality, particularly for acquiring knowledge and services to protect themselves from negative health outcomes, make adolescents more vulnerable than adults to infections, exploitation and abuse.

In Zimbabwe, the subject of adolescent sexuality is considered a societal taboo and associated with strong ideology and moral values, restricting open discussion. Although Section 76 (1) of the Constitution of Zimbabwe states that:

“Every citizen and permanent resident of Zimbabwe has the right to have access to basic health-care services, including reproductive health-care services”, existing legal and policy guidelines limit access.¹

According to the Southern Africa Development Community Parliamentary Forum (SADC PF) 2013 Report on SRH for young people, the bulk of young people are resident in institutions of learning at primary, secondary or tertiary levels yet these structures do not have comprehensive policies and programs to provide for student friendly SRH services.²

Given this backdrop, Students and Youth Working on Reproductive Health Action Team (SAYWHAT) conceptualized and implemented the Youth Access Project focusing on young people in tertiary institutions.

1. Zimbabwe's Constitution. 2013. Constitute. (Accessed 17 December 2020: https://www.constituteproject.org/constitution/Zimbabwe_2013.pdf)
2. SADC SRHR Strategy (2019-2030). SADC. (Accessed 17 December 2020: <https://hivpreventioncoalition.unaids.org/wp-content/uploads/2020/07/SADC-SRHR-Strategy-2019-2030-for-public.pdf>)

Putting young people at the center

Founded in 2003, SAYWHAT is a membership based public health institution that serves as a platform for students in tertiary institutions to discuss sexual and reproductive health challenges. The organization aims at fostering personal responsibility for maintaining good SRH status and seeks to mobilize students to participate in the promotion of the global targets and goals for improved SRH and addressing gender based violence (GBV). The organization derives its membership from institutions of higher learning including universities, polytechnics, teachers training colleges, vocational training centers and agricultural colleges in Zimbabwe and across Southern Africa.



Since 2019, SAYWHAT with support from Hivos through the Regional SRHR Fund has been implementing the 'Youth Access' project which seeks to improve access to Adolescent Sexual and Reproductive Health and Rights (ASRHR) services and commodities among students and young people in Malawi, Zambia and Zimbabwe. Specifically, the project aims to:

- Improve access to SRHR information among students and youth in Malawi, Zambia and Zimbabwe.
- Strengthen youth participation in SRHR-related policy engagements in Malawi, Zambia and Zimbabwe.
- Increase awareness of the SADC SRHR Strategy (2019-2030) by students.

For young people entering into tertiary institutions, the onset of adolescence brings not only changes to their bodies but also new vulnerabilities to human rights abuses, particularly in the arenas of sexuality, marriage and childbearing.

Even those able to find accurate information about their health and rights may be unable to access the services needed to protect their health. Adolescents are deterred from access to high quality health services by cost and the often judgmental attitudes of health care providers, particularly when seeking care and advice on sexuality-related matters. In general, the three project focus countries remain relatively conservative where discussions of sexual issues, abortion and adolescents' usage of contraceptives are still widely a taboo.

Enhancing youth leadership and participation

To grow and develop in good health, adolescents need information, including age-appropriate comprehensive sexuality education; opportunities to develop life skills; health services that are acceptable, equitable, appropriate and effective; and safe and supportive environments. They also need opportunities to meaningfully participate in the design and delivery of interventions to improve and maintain their health. Expanding such opportunities is key to responding to adolescents' specific needs and rights.

In implementing the Youth Access Project, young people were not only regarded as the targeted group and beneficiaries for the project but as partners with capacity to influence the trajectory of the project.

“Through SAYWHAT, we have been empowered to take leadership in sharing information on ASRHR; we are given roles where we are able to shape the trajectory of training and programs,”

”

The project involved a variety of activities: training of adolescents, peer education, safe spaces, life skills training, debating and providing information in accessible formats. All activities reinforced and complemented each other. The project targeted young men and women equally, ensuring a sound interaction between gender and ASRHR-related issues.

Leveraging on SAYWHAT's Expertise in ASRHR and Partnership Building

SAYWHAT's Youth Access project has managed to target and empower young people to be their own agents of change due to long-existing relationships that it has managed to establish since its founding in 2007. In implementing the Youth Access project, SAYWHAT has been able to achieve success in a relatively short time because of its ability to leverage its relationships and experience.

The project provided an opportunity for young people in the region to contribute to the implementation of the SADC SRHR strategy and demand accountability through accountability dialogues that were conducted in Malawi, Zambia and Zimbabwe.

There are institutions and partners where young people have limited access to and the project enabled young people to interact with such. Through the project young people have interacted with the SADC PF, Chairpersons of parliament committees of health, Ministries of Health, funding partners and other Civil Society Organizations (CSOs).



“Through our experience and networks, we have managed to achieve results in an accelerated manner. In particular, we managed to equip students with knowledge of the SADC SRHR Strategy (2019-2030) such that they are now able to lobby policy makers using grounded knowledge. Also, students are now able to confidently express themselves on various matters due to the dialogue and debating sessions that we have made them to undertake. Students have been empowered to gain knowledge and articulate issues that affect their sex and sexuality as well as network across national borders for purposes of learning and lobbying policy makers,”

Spiwe Kahuni, SAYWHAT's
Regional Program Coordinator.

"Partnerships have been developed and enhanced with universities, media and relevant government ministries across the three countries where we are working. We were also supported in coalition building with other organizations that are being supported by Hivos," said Spiwe Kahuni.

Through the project, SAYWHAT managed to interact with over 40 organizations including colleges and universities in the region, CSOs, parliaments, development partners and regional bodies. These partnerships have strengthened SAYWHAT's ability to circulate and mobilize for the implementation of ASRHR policies.

Fostering Collective Advocacy among Young People

Through the Youth Access Project, a Southern African Regional Students and Youth Conference on Sexual and Reproductive Health Rights (SARSYC) was convened in Zambia, attracting approximately 300 tertiary students.



The delegates from nine countries including Botswana, Eswatini, Lesotho, Malawi, Mozambique, Namibia, South Africa, Zambia and Zimbabwe. The delegates represented a total of 64 organizations and institutions of higher learning.



"SARSYC is a platform that prioritizes students from Southern Africa as a key constituency amongst young people. Students are uniquely positioned through their academic experiences to critically contribute to the region's development agenda.

SARSYC harnesses such potential from students and transforms it into positive actions that inform SAYWHAT's programs and interventions,"

- Kahuni

A key outcome of the conference was a call to action that was developed and adopted as the official resolutions from the students and youth in Southern Africa.

Specifically, the students resolved to:

- Systematically plan and strive to be active participants in policy advocacy, particularly in the development of reproductive health related policies and laws in their respective countries.
- Continue to coordinate themselves, share lessons and learn from each other and further develop their own action-oriented plans localized to their specific context targeting other young people to promote responsible sexual and reproductive health choices.

The conference managed to draw commitments from key partners such as Hivos, Sida and UNESCO to address various SRHR challenges that face students in the region.



The conference also increased awareness of the SADC SRHR Strategy of 2019-2030 and commitment to further analyze and monitor its implementation by students and youth from the region. Thematic issues that were highlighted included innovation and technology on SRHR, sexual harassment, safe sex and condom use, comprehensive sexuality education and policies addressing SRHR in schools and higher education institutions. The conference ensured the participation of male and female students and youth, including gender non-conforming young people.

In addition, a special policy dialogue between Members of Parliament and students from the region highlighted the need to ensure that policies, laws and commitments made at a regional level are domesticated and implemented at country level. The students and youths demonstrated collective regional advocacy and solidarity on co-creating solutions to the challenges affecting them, including developing a call to action for the region.



Kahuni said that the SARSYC harnessed the potential of young people and other stakeholders in coming up with one voice on matters related to young people's sexual and reproductive health.

"SARSYC is a platform where voices of young people are consolidated and engineer a solution focused movement, driven by young people for advocacy to address varying SRH challenges faced by young people in the region,"

- Kahuni.

During the conference, students were able to interrogate the provisions of the Sexual and Reproductive Health and Rights (SRHR) Strategy for the SADC Region (2019–2030) which provides a framework for the Member States to fast-track a healthy sexual and reproductive life for the people in the region.

Regional conferencing enables tertiary students to realize the commonality of issues and challenges that they have to deal with across national boundaries. It empowers young people to value the power of collective advocacy. Collective advocacy is where a group of people who are all facing a common problem and have had similar experiences get together to work on specific issues and have their voices heard. The group as a whole may campaign on an issue that affects them.

Collective advocacy has the potential to amplify the voices of young people: it equips young people with tools and knowledge to not only lobby policy makers but to have their own voices heard in the policy making processes.

Debating and Dialoguing as a tool to discuss difficult issues

In implementing the Youth Access Project, SAYWHAT has employed debate and dialoguing as a tool for young people to tackle difficult and often taboo subject matters. This has enabled students to discover and understand one another's perspectives and ideas. The intention is to bring forth and make visible assumptions and relationships, and to gain new insight and understanding.

A debate competition conducted during the conference fostered critical thinking and research among students. According to Kahuni, the debates focused on various controversial issues such as feminism and its impact on society, sexual harassment and gender.

The debate clubs help the students to tackle taboo subjects such as sexual identities that they would not be able to due to conservative societal attitudes regarding sex and sexuality. The debate clubs have played a key role in inculcating a spirit of agency in the young people.

"The debates have enabled me to deal with subjects that I would not ordinarily address such as sexual identity and whether feminism is progressive or not. The debates are a safe space to tackle difficult topics, and they help in expanding one's perspective,"

”

-Chido Mawire.

A student at the Zimbabwe Ezekiel Guti University, a faith-based institution.

Equipping students with life skills

SAYWHAT equipped students with leadership and life skills. Life skills are abilities for adaptive and positive behavior, that enable individuals to deal effectively with the demands and challenges of everyday life. The skills that are at the heart of SAYWHAT's skills-based initiatives for the promotion of the health and well-being of students include: decision making, problem solving, creative thinking, critical thinking, effective communication, interpersonal relationship skills, self-awareness, empathy, coping with emotions and coping with stress.

Teaching life skills as generic skills in relation to everyday life could form the foundation of life skills education for the promotion of mental well-being, and healthy interaction and behavior. More problem specific skills, such as assertively dealing with peer pressures to use drugs, to have unprotected sex, or to become involved in vandalism, could be built on this foundation.

Results and Impact

The Youth Access Project aimed at increasing young people's ability to advocate and lobby their peers and policymakers on progressive ASRHR. The project actively promoted and supported young people to engender meaningful youth participation. Participation and active citizenship is about having the right, the means, the space and the opportunity and where necessary the support to participate in and influence decisions and engaging in actions and activities so as to contribute to building a better society.

The project has raised awareness of policies and laws related to youth, meaningful participation of young people in the design, development, implementation and evaluation of policies and programmes related to youth sexual and reproductive health and rights. Efforts under the Youth Access project achieved the following:



**01**

Increased understanding of policies and strategies that govern SRHR delivery for young people.

The Youth Access Project provided an opportunity for young people in the region to gain an understanding of policies and strategies that govern SRHR delivery. In addition, it enabled young people to contribute to the implementation of the SADC SRHR strategy and demand accountability through accountability dialogues that were conducted in Malawi, Zambia and Zimbabwe. Through youth conferencing, SAYWHAT managed to reach approximately 300 students in tertiary institutions across the region, enabling them to become SRHR champions in their respective countries.

**02**

Improved knowledge on the domestication process of policies from a regional level to a country level

The project improved knowledge on the domestication process of policies from a regional level to a country level. The project increased networks and partnerships amongst young people who participated in the project. In addition, an information dissemination dialogue on the SADC SRHR strategy ensured that the targeted young people have the knowledge on the strategy and can demand accountability at regional and country level.

There are institutions and partners where young people have limited access to and the project enabled young people to interact with such. Through the project young people have interacted with the SADC PF, Chairpersons of parliament committees of health, Ministries of Health, funding partners and other CSOs.

**03**

Increased interest to participate in policy processes by young people

The project managed to increase awareness and focus on the SADC SRHR Strategy of 2019-2030 and commitment to further analyze and monitor its implementation by students and youth from the region. Three policy and accountability dialogues were conducted in Malawi, Zambia and Zimbabwe between students and youth and representatives of the Ministries of Health to discuss how a partnership between the youth and the Ministries can be forged to ensure effective implementation of the SADC SRHR strategy up to 2030. These meetings will ensure young people are briefed on efforts being put in place by the Ministries and also have the youth share their ideas on what should be done to improve access to SRHR under the SADC SRHR strategy.

Recommendations

The lessons learnt from SAYWHAT's project implementation provides the following recommendations for replication of similar approaches;

01

Leveraging the power of technology.

Against a background of Covid 19 and related government regulations and restrictions, technology has proved to be a key tool in enabling young people to have access to SRHR information. Young people need to be equipped with skills, tools and knowledge on how to tap into the full potential of technology. Issues of data privacy and confidentiality need to be high on the agenda in the new ways of working to reach young people.



02

Ensuring inclusive spaces that are respectful of sexual orientation, gender identity and expression

Youth are especially concerned about confidentiality regarding their sexual orientation or gender identity. They may be put in considerable danger by being deliberately or accidentally 'outed.' It is therefore vital to build the capacity of peer educators to serve Lesbian, Gay, Bisexual, Transgender, Intersex or Questioning (LGBTIQ+) youth as well as create safe spaces for LGBTIQ+. Addressing homophobia and transphobia within tertiary institutions is essential.



03

Engaging Leaders of Faith Based Institutions

Religion has long been used as the basis for the denial of young peoples' rights in the sexual and reproductive arena. It is also a way of opposing women's rights to equality and non-discrimination. A concerted campaign to counter these attitudes should be initiated. Engaging leaders of faith-based institutions should be an ongoing concern. This should be based on evidenced-based research.



04

Develop interventions particularly targeted at addressing toxic masculinities and improving health seeking behaviors.

Toxic masculinity, cultural expectations and standards of aggressive male behavior that are harmful not only to young women and society but also to young men themselves need to be challenged in a culturally sensitive manner. The construct of feminist masculinities which refers to versions of masculinity that do not generate gender role strain for men and that do support gender equality for women need to be deliberately inculcated in young men at tertiary institutions.



05

Promoting Mental Health

The project also revealed that mental health needs to be prioritized among tertiary students. Mental health includes emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Promoting well-being that integrates mental health (mind) and physical health (body) that results in more holistic approaches to SRHR is required among young people in tertiary institutions.



Towards an integrated approach to ASRHR

A combination of approaches is warranted for optimal results as young people's ASRHR outcomes are determined by a complex web of interrelated factors that operate at various levels. As the Lancet Commission on adolescent health and well-being has noted in its seminal report, *"the most powerful actions for adolescent health and wellbeing are intersectoral, multilevel, and multi-component."*

ASRHR cannot be addressed in isolation from the social, cultural, economic and physical environment. A program model that integrates health, economic, social and health services has the most potential to fully respond to the needs of students in tertiary institutions.

SAYWHAT will continue to involve young people in the planning, implementation and evaluation of programs. With young people at the center of programming, services are more likely to continue even if donor funding ceases. SAYWHAT will also target more youth at country level through a peer train-the-trainer model. The model will enable SAYWHAT to reach young people that may not be direct beneficiaries.

SAYWHAT will continue engaging authorities to ensure that young people are given space at the table. The process of drafting and adopting laws and policies need to include a step of providing the option to young people of open consultations about the said policies and laws. Efforts will continue to be put in this area to ensure full representation of young people in the policy making processes. It is vital that young people remain meaningfully engaged in the implementation, monitoring, and evaluation of the SADC SRHR Strategy among other laws and policies.



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