SAFEGUARD YOUNG PEOPLE PROGRAMME
ANNUAL REPORT 2020

Fighting for the Sexual and Reproductive Health and Rights of Young People During a Global Pandemic
United Nations Population Fund
Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled
CONTENTS

List of Abbreviations .......................................................... 5
Foreword ............................................................................... 7
Preparing Young People for the New Normal ......................... 8
Towards the Realization of Adolescent Sexual Reproductive Health and Rights (ASRHR) ................................................. 9
Building a Conducive Legal and Policy Environment for ASRHR .............................................................. 11
#YouthPowerHub – A Partnership with and for Young People ................................................................. 13
The Power of Making Informed Decisions ...................................... 16
Youth Empowerment ........................................................... 17
Sexual and Reproductive Health Services for All ......................... 23
Quality and Inclusive Adolescent and Youth-Friendly Health Services ....................................................... 24
Challenges and Opportunities .................................................... 26
Lessons Learned .................................................................. 26
### LIST OF ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AfriYAN</td>
<td>African Youth and Adolescents Network on Population and Development</td>
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<td>ASRHR</td>
<td>Adolescent Sexual and Reproductive Health and Rights</td>
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<td>AUC</td>
<td>African Union Commission</td>
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<td>AYFHS</td>
<td>Adolescent and Youth Friendly Health Services</td>
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<td>COVID-19</td>
<td>Coronavirus Disease 2019</td>
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<td>CSE</td>
<td>Comprehensive Sexuality Education</td>
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<td>CSO</td>
<td>Civil Society Organizations</td>
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<td>DD</td>
<td>Demographic Dividend</td>
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<td>ESA</td>
<td>East and Southern Africa</td>
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<td>ESARO</td>
<td>East and Southern Africa Regional Office</td>
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<td>EUP</td>
<td>Early and Unintended Pregnancies</td>
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<td>GBV</td>
<td>Gender-Based Violence</td>
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<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<td>ICPD</td>
<td>International Conference on Population and Development</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
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<td>MHM</td>
<td>Menstrual Health Management</td>
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<td>NGO</td>
<td>Non-Governmental Organization</td>
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<td>PCC</td>
<td>Parent to Child Communication</td>
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<td>PSEA</td>
<td>Protection Against Sexual Exploitation and Abuse</td>
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<td>RGN</td>
<td>Registered General Nurse</td>
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<td>SADC</td>
<td>Southern African Development Community</td>
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<td>SADC-PF</td>
<td>Southern African Development Community Parliamentary Forum</td>
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<td>SBCC</td>
<td>Social and Behaviour Change Communication</td>
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<td>SDG</td>
<td>Sustainable Development Goal</td>
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<td>SGBV</td>
<td>Sexual and Gender-Based Violence</td>
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<td>SRH</td>
<td>Sexual and Reproductive Health</td>
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<td>SRHR</td>
<td>Sexual and Reproductive Health and Rights</td>
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<td>STIs</td>
<td>Sexually Transmitted Infections</td>
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<td>SYP</td>
<td>Safeguard Young People Programme</td>
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<td>UHC</td>
<td>Universal Health Coverage</td>
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<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
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<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<td>WAR</td>
<td>Women Against Rape</td>
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<td>WHO</td>
<td>World Health Organization</td>
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<td>YFHS</td>
<td>Youth-Friendly Health Services</td>
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<td>ZAPSO</td>
<td>Zimbabwe AIDS Prevention and Support Organisation</td>
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“Rather than allow a crisis to change who we are, allow it to reveal who we are.”

– Dr. Julitta Onabanjo
If I had to reduce 2020 to one of life’s big lessons, it would be this: Rather than allow a crisis to change who we are, allow it to reveal who we are.

In the case of UNFPA, one of our facets is our passion for the realization of sexual and reproductive health and rights (SRHR) for adolescents and young people.

By any standard, 2020 was an unprecedented year. We were faced with ruptures to social, economic, political, community and familial systems. Levels of existing social inequalities were expanded and already fragile health systems buckled under the weight of the COVID-19 pandemic. In the midst of trying to adapt to the new normal, we knew that the rolling back of SRHR gains for adolescents and young people would be a real danger.

For that reason, we’re proud that the Safeguard Young People (SYP) programmatic response to the pandemic was swift, well considered and ultimately successful in ensuring that SRHR remained on the agenda. At the onset of the pandemic, the SYP regional team quickly established systems to assist countries in implementing their approved annual work plans. This included providing technical guidance and reprogramming tools, and organizing technical webinars. We engaged in extensive advocacy with countries to address young people’s fear around COVID-19 transmission, especially through health facilities, and for the inclusion of SRHR as an essential service in the COVID-19 response.

As the pandemic revealed new vulnerabilities among young people, such as mental and emotional challenges and heightened sexual and gender-based violence, SYP used this as a moment of reflection to identify where the programme could improve on its mission to realize comprehensive and integrated SRHR for young people in the region.

I am encouraged that we have used this unexpected challenge to intensify our commitment to the SYP programme’s goal of ensuring that by 2022, the wellbeing of adolescents and young people aged 10 years to 24 years is improved, with a focus on their sexual and reproductive health status, including the reduction of new HIV infections in the Southern African Development Community (SADC) region, specifically in Botswana, Eswatini, Lesotho, Malawi, Namibia, South Africa, Zambia and Zimbabwe.

The year 2020 marked the beginning of the third phase of the SYP programme, which will conclude in December 2022. We’re deeply appreciative of the partnerships that were strengthened during 2020 as it allowed us to adapt and find innovative ways in reaching groups that, almost overnight, occupied even more remote and marginalized positions in society. We’re particularly grateful for ongoing financial and technical support from the Swiss Agency for Development and Cooperation (SDC), whose accessibility and understanding during the pandemic facilitated the necessary reprogramming of funds.

Lastly, and perhaps most importantly, we celebrate the young people of the region. Whether as individuals or part of broader networks, they have not retreated in the face of the pandemic, but mobilized with resources available to them. While we recognize that we still have a long, uphill journey, we continue to be inspired by their energy and commitment to rise to any challenge.

Dr. Julitta Onabanjo
UNFPA Regional Director, East and Southern Africa
**PREPARING YOUNG PEOPLE FOR THE NEW NORMAL**

When it became clear that the COVID-19 pandemic was set to change life as we know it, the SYP regional team employed several different strategies to ensure quality action at regional and country levels. As it was essential to align with the African Union Commission (AUC) on Youth and COVID-19, the programme worked in partnership with relevant youth networks and organizations and began applying the **3 Ps:**

<table>
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<th>PREVENTING</th>
<th>PROVIDING</th>
<th>PROTECTING</th>
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<td>young people from being infected by COVID-19 and from infecting others. SYP supported the roll-out of #youthagainst COVID-19 campaign, as well as the generation of accurate and complete age and sex-disaggregated data to better understand how COVID-19 impacts different segments of the population. It was also necessary to provide countries with technical guidance on community engagement with young people. SYP integrated COVID-19 safety information into some of its existing online resources such as <a href="http://www.tuneme.org">www.tuneme.org</a> and <a href="http://www.amaze.org/za">www.amaze.org/za</a> and child and adolescent-specific hotlines in countries. With social distancing measures in place in all eight implementing countries, radio became the centre point for information dissemination, as did social media. Social media platforms were utilized to promote comprehensive sexuality education (CSE), specifically when it came to information on menstrual health management (MHM), child marriage and adolescent sexual and reproductive health (ASRHR).</td>
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<td>essential services. Knowing that working together could ensure the scale-up of remote and/or virtual delivery of integrated HIV, SRHR and GBV youth-friendly health services, as well as psychosocial support through mobile and outreach of services for adolescents and young people.</td>
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<td>young people from COVID-19 and related SRHR challenges. The virtual space took on new meaning in 2020, and a series of webinars were held in collaboration with UNFPA country offices and colleagues from the World Health Organization (WHO), the United Nations Children’s Fund (UNICEF), International Federation of Red Cross and Red Crescent Societies, Scouts, Restless Development and African Youth and Adolescents Network on Population and Development (AfriYAN).</td>
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2020 was not all work and no play. SYP hosted three e-parties in collaboration with Eswatini artist KrTC Of Hip Hop. More than 140 young people tuned in to watch and participate in conversations around COVID-19 and ASRHR.
Our webinar series with and for youth on COVID-19 reached more than 200 young leaders in the region, and succeeded in equipping adolescents and young people with skills to support continuation of SRHR service delivery and information to adolescents and young people during the COVID-19 pandemic.

In recognizing that COVID-19 brushes up against a host of other social and health issues, SYP integrated COVID-19 considerations into a range of technical guidance briefs. These included the integration of SRHR into economic empowerment initiatives, the programmatic guidance on integration of climate change into CSE, and the technical brief on the integration of MHM in SRHR programmes.

TOWARDS THE REALIZATION OF ADOLESCENT SEXUAL REPRODUCTIVE HEALTH AND RIGHTS

To promote and protect adolescents and young people’s rights, SYP works to strengthen the capacity of regional and national institutions to enable a conducive regional and national legal and policy environment. This includes establishing and/or reinforcing accountability mechanisms.

By 2020, all eight countries implementing the programme were utilizing the approved legal framework to influence their national legislative and policy environment.

To achieve the programme’s overall objective of realizing ASRHR, adolescents and young people need to meaningfully participate in international, regional and national decision-making structures and accountability mechanisms. SYP’s work with youth networks contributes to making this happen. Despite a difficult year, 159 national and district youth networks were functional in 2020.

The multi-layered nature of the SYP programme required effective coordination of its various moving parts and an increase in the number of partners. In 2020, all eight implementing countries had functional SYP coordination mechanisms, and all had platforms disseminating strategic information.
It is clear that despite the significant challenges, countries implementing SYP have made positive strides and, at times, exceeded their targets. 1,724 youth network members were trained in advocacy for SRHR and youth development, greatly exceeding the year’s target of 1,052. This was a result of working more closely with young people during COVID-19, particularly on their mental health and resilience, helping them to overcome their fear of accessing services while still interacting with their peers.
BUILDING A CONDUCIVE LEGAL AND POLICY ENVIRONMENT FOR ASRHR

In 2020, SYP focused on generating strategic information and engaging in advocacy efforts to promote law and policy reforms at national and regional level. These are some of the necessary foundations for accelerating universal access to ASRHR.

UNFPA developed two technical briefs on the ages of consent to services and the criminalization of consensual sexual activities among minors in ESA. UNFPA, in collaboration with the SADC Parliamentary Forum (SADC-PF), also supported youth networks with online engagements between young people and leaders of national parliaments on issues related to ASRHR. The online consultations resulted in commitments from the Honourable Speakers and the development of an Accountability Framework for the Tshwane Declaration and related commitments on SRHR, HIV and gender equality within the context of universal health coverage (UHC).

Realizing the need to continue work on child marriage in the context of COVID-19, the UNFPA and UNICEF global programme on child marriage, in collaboration with SYP, authored the Regional Brief on Child Marriage and COVID-19. This supported the work of Country Offices by highlighting the disruptions caused by COVID-19, presenting alternative approaches, and providing recommendations on how to strengthen programme resilience.

Although it is encouraging to see the move towards more holistic responses to Menstrual Health Management (MHM), there is still inadequate coherence around it, as well as a lack of evidence on the effectiveness of menstrual health interventions in many countries across Africa.

Against this background, UNFPA ESARO and the African Coalition for MHM, supported by SYP, conducted a systematic review on integrating MHM into SRHR policies and programmes. This resulted in a Technical Brief which will provide guidance on how to strengthen and operationalize the integration of MHM in SRHR policies and programmes at global, regional, and national levels.

COVID-19 is undoubtedly shaping the economic realities and forecasts of many countries in Africa and will impact the ability of and the degree to which young people can access economic opportunities. As a result, UNFPA ESARO, under the auspices of the SYP Programme, partnered with the International Labour Organization (ILO) and the World Bank to develop a guidance note on the integration of SRHR into economic empowerment initiatives for young people. This note built on the mapping of best practices in this area of

COVID-19 gave gender-based violence (GBV) an even greater sense of urgency. Lockdowns that restrict women’s movements may have resulted in a rise in different forms of GBV, such as intimate partner violence. This makes the development of the SADC Model Law on Gender-Based Violence in 2020 even more significant. The process, led by SADC-PF, is in response to the current shortfalls in legislation on GBV and the chronic implementation gaps across the region. The law will be applicable to all types of GBV, including against boys. Once the GBV model legislation is adopted, the SADC-PF will encourage member states to domesticate and implement key aspects of the model legislation at the national level.
work developed in 2019. The guidance operationalizes the AU Roadmap on the demographic dividend and investing in young people, giving UNFPA’s country offices and other stakeholders the necessary guidance to ensure that SRHR is part of economic empowerment programmes. As a result of this joint effort, the World Bank is currently designing programmes on women and girls’ economic empowerment which will include a component on SRHR.

The AU Roadmap also guided the **SADC Youth Programme**, developed through UNFPA’s partnership with SADC. The SADC Youth Programme draws from the learnings of the SYP Programme and will be considered SYP’s legacy in the region. This SADC Youth Programme paves the way for the forthcoming development of a SADC Youth Protocol in the region. With the support of SYP, countries have been able to advocate for the **integration of demographic dividend** (DD) dimensions into national development plans, sector policies and sub-national development plans. It was recognized that there is a need to distinctly address gender equality as part of the pathway towards harnessing the DD. To ensure that certain hard-won gains related to DD were not lost as a result of COVID-19, UNFPA ESARO, African Institute for Development Policy and the University of Cape Town compiled an analysis of best practices on translating demographic information and thinking into national plans and policies; a guidance note on how to influence evidence-based decision-making; and a rapid assessment of the impact of COVID-19 on DD pillars and the implications for DD programming.

### ICPD25 – One Year On

To celebrate the first anniversary of the landmark Nairobi Summit on ICPD25, we brought together hundreds of participants, including young people dedicated to the pursuit of sexual and reproductive health and rights for all in a webinar hosted by UNFPA ESARO, under the auspices of SYP and the WHO Regional Office. The aim was to disseminate the findings of the Journal of Adolescent Health supplement which highlighted progress made on ASRHR over the past 25 years, and reflect on the impact of COVID-19 on ASRHR, now and in the future.

*Leaving no one behind; taking the social mobilization campaign to rural communities.*
SYP continues to support the AfriYAN Regional and Country Networks to champion meaningful youth participation and influence SRHR policy and programme decisions at national and regional level. Most recently, SYP, in collaboration with AfriYAN ESA, supported YACT Youth in Action, the first Pan-African regional interactive website. The partnership also led efforts on youth-led campaigns focusing on SRHR, the Sustainable Development Goals (SDGs) Decade of Action and social accountability for ICPD25 commitments.

Launched in December 2020, the digital hub and campaigns focused on the pillars of Education, Engagement and Collective Action/Mobilization to meet the current needs of the youth population and foster youth-led accountability within this pandemic period and beyond. It is anticipated that it will promote knowledge, understanding and action among youth in the continent through addressing critical SRHR and socio-economic gaps laid bare by the COVID-19 pandemic.

The Safeguard Young People Programme in 2020: Country Highlights

**BOTSWANA**

Women Against Rape (WAR) in BOTSWANA, with technical support from SYP, is implementing dialogues on Early and Unintended Pregnancies (EUP), CSE for out of school youth and also tracking reproductive health commodities in Ngami and Okavango districts. The project reached over **900 young people** with SRH information and linked them with services in Maun, Gumare, Shakawe and Seronga. **54,505 condoms** were distributed, and 80 participants availed themselves of HIV testing services.

**ESWATINI**

In ESWATINI, the draft of the National Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Strategy, which adopts the SADC SRHR Strategy, was developed. The National Youth Policy was finalized, launched and disseminated to all the regions, and the National Youth Inter-Ministerial Committee was launched in 2020 by the Minister for Sports, Culture and Youth Affairs.

**LESOTHO**

Members of the 2020 UN Youth Advisory Panel in LESOTHO participated in an online survey on the impact of COVID-19 on the youth. They also gave input into the review of the Assessment of the Socio-Economic Impact of COVID-19 on Youth and conducted **10 radio programmes** on EUP and Child Marriage to increase awareness on the issues.
MALAWI
SYP supported the orientation of teachers in 297 school structures in MALAWI on the revised learner readmission policy, creating an enabling environment for girls who fall pregnant to be supported to re-enrol.

ZIMBABWE
ZIMBABWE provided 70 young people with mobile data, which enabled their participation in online public hearings on the Constitutional Amendment Bill 2 and the Cyber Security and Data Protection Bill. Additionally, a total of 51 people participated in the first national MHM symposium in person and virtually, including representatives from government ministries and civil society organizations (CSO).

NAMIBIA
Thirty-five MPs in NAMIBIA, seven National Assembly staff members and eighteen members of the National Working Group were trained on issues of CSE and abortion in Otjiwarongo region. This was part of UNFPA’s larger technical support to the SRH/HIV and AIDS governance project implemented by Parliament.

SOUTH AFRICA
With technical assistance from UNFPA, the Department of Women, Youth and Persons with Disabilities and Office of the President in SOUTH AFRICA were able to develop a Monitoring and Evaluation (M&E) framework of the National Strategic Plan on GBV. The country team also supported the development of the M&E framework for the sanitary-dignity implementation framework.

ZAMBIA
80 participants in ZAMBIA, including chiefs, headmen, civil leaders, service providers, parents and young people, participated in dialogues on the reduction of child marriage, the prevalence of teenage pregnancies, and their relationships to high school dropout rates in chiefdoms. All the dialogues supported by UNFPA advocated for the age of consent to access services to be 14 years and consent to access ASRHR information to be 10 years.

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Susan’s Story

ZIMBABWE: Sista2Sista Clubs Step in for Menstrual Health

“I was very scared and I kept making a mess, even when I tried to clean up – it was hardly ever good enough,” Susan Marima recounts her first menstrual period, at only 12 years old.

Though Susan, now 21, lived with her parents and elder siblings – she was too embarrassed to say anything. “It was new to me, and it always left me feeling embarrassed.” Susan says she used tissue paper and little pieces of cloth. It was only when her mother came across the ‘mess’ that she knew that her youngest daughter had started menstruating.

In an effort to support young girls like Susan through this important milestone in their lives, UNFPA SYP supported Sista2Sista clubs to assist young girls to prepare and manage their menstrual health. Launched in 2013, the Sista2Sista programme offers a safe place where adolescent girls can speak with mentors and each other about life experiences. Girls in the clubs learn about sexual and reproductive health and rights – including MHM, financial literacy, and how to navigate difficult social situations, including coercive sexual relationships.

Spiwe Mpofu, a Sista2Sista mentor in Hopley, south of Harare says menstrual health cannot be separated from sexual and reproductive health and is, therefore, a critical component of the Sista2Sista manual.

“The Sista2Sista clubs are attended by girls of ages 10 - 24, lessons around menstrual hygiene for those experiencing puberty usually include preparations for the onset of the period and use of sanitary products while for the older ones, the emphasis is on hygiene during the period,” Mpofu says.

Debela Madzara (21) of Hopley, says the lockdown imposed by COVID-19 is making it difficult for girls and young women like herself to maintain their hygiene during menstrual periods.

“I joined Sista2Sista club in 2017 and from the menstrual hygiene lessons, I know what I need to do to keep myself clean during my period – but keeping clean is increasingly a problem during this lock-down,” Debela says. “We are struggling financially; we have had to abandon our mini-markets due to government restrictions, and this has left us unable to buy sanitary pads and soap to wash the reusable pads. We do not even have soap to bathe with.”

These concerns are echoed by Spiwe and another Sista2Sista mentor, Naume Chakoromoka (51) who says, in addition to shortages of toiletries – scarcity of water in most of Harare’s high-density suburbs has made it difficult for girls to maintain hygiene. “This exposes young girls to abuse as they seek water or travel lengthy distances to access the precious commodity,” she says.

Through partners like the Zimbabwe Community Health Intervention Research Behavioural Change Programme (ZICHIRe), FACT, The Zimbabwe AIDS Prevention and Support Organization, World Vision, this year UNFPA Zimbabwe distributed reusable pads and menstrual cups to Sista2Sista club girls in 23 districts – Hopely included. During the lockdown, UNFPA is supporting its partners to distribute disposable pads to enable girls and young women to continue their periods with dignity.

The Minister of Women Affairs, Community, Small and Medium Enterprise Development, Dr. Sithembiso Nyoni, in a statement to mark Menstrual Health Management Day said the first steps towards the promotion of menstrual hygiene is to ensure it is not only seen as a women’s issue but a development issue: “Women and girls, especially those from marginalized communities, face an added disadvantage in that they fail to access sanitary products because of the high costs. This is exacerbated by lack of knowledge due to ignorance of personal hygiene, which is important. All this exposes them to health risks of contracting infections of the reproductive system and may actually impact on their reproductive health. The government, together with relevant stakeholders, must commit ourselves to meet the reproductive health needs of women and girls and ensure that they have access to correct and factual information regarding menstruation.”

In 2019, the Zimbabwe government scrapped import duty on sanitary products and availed a budget of USD200 million through the Ministry of Primary and Secondary Education to cater for the provision of sanitary products for girls in schools. UNFPA has also supported the distribution of reusable pads and menstrual cups for young women in tertiary institutions.
THE POWER OF MAKING INFORMED DECISIONS

SYP emphasizes building the capacity of institutions to design and implement integrated and quality CSE in schools. Institutions are also supported to deliver proven and tailored quality social behaviour change communication (SBCC) interventions. These will assist adolescents and young people in demanding integrated SRHR, GBV and HIV information and services. The SYP Programme also has a specific focus on HIV and substance abuse prevention.

As a result of the sustained efforts in 2020, seven of the eight implementing countries now have inclusive, quality CSE for out of school programmes and/or strategies, and a staggering 10,962 primary and secondary schools provide life skills-based HIV and sexuality education.

MAKING STRIDES IN SRHR IN 2020 - A SNAPSHOT

- 4 out of 8 countries have inclusive and quality CSE institutionalized in pre-service teacher training.
- 5 out of 8 countries have inclusive and quality CSE modules institutionalized in tertiary institutions.
- 10,962 primary and secondary schools provide life skills-based HIV and sexuality education.
- 4,456,448 learners received inclusive and quality CSE lessons in school.
- 66 project administrative units have functional referral mechanisms between health, education and social services.
- 8,630 out of school boys and girls educated on effects of climate change, environment and disaster risks as they pertain to SRHR, HIV, GBV and wellbeing.
- 4,090,540 young people reached with SBCC/CSE Programmes including TuneMe and the Music project, initiation rites and sports clubs.
- 6 out of 8 countries have incorporated the prevention of substance abuse into SBCC/CSE programmes.
- 5 out of 8 countries have established parent-to-child communication programmes.
YOUTH EMPOWERMENT

During the COVID-19 pandemic, radio emerged as an effective medium to safely reach large numbers of young people with SRHR and CSE messages, including those in rural areas, those left behind, and marginalized groups. As part of the Let’s Talk EUP campaign activities, three radio drama series were developed, including one comprising of 13 episodes and crafted with guidance from MIET Africa and UNESCO. This particular series took on a youth-led talk show format in Lesotho, Malawi, Zambia and Zimbabwe. All three radio programmes drew their key messages from the contents of the SYP Regional CSE manual for out of school young people.

SYP supported the mid-term review of the Regional Let’s Talk Early and Unintended Pregnancy (EUP) Campaign:

- The prominence of EUP in all of East and Southern Africa is a good entry point for further advocacy for CSE;
- The campaign aligns with and increases knowledge of national policies such as the school re-entry policies for pregnant learners;
- The training of journalists from the region to better report on the complexities of EUP is a notable benefit;
- The campaign’s focus on health, education and rights demonstrates that we all have a role to play in preventing EUP and the responsibility is not solely on the adolescent girl; and
- COVID-19 hampered the progress of the campaign and its planned community-based activities, exacerbating the drivers of EUP and underlining the importance of strengthening the M&E elements of the campaign.

SYP also led the development of the quality assured Minimum Package for Out of School CSE, called My Body, My Life, My World. This minimum package is a tangible means of operationalizing the UNFPA Global Youth Strategy, the newly launched International and Programmatic Guidance on Out of School CSE.

The iCAN CSE package for YPLHIV has also been updated, and a dedicated CSE package for young people with disabilities called Breaking the Silence, is being finalized.
A CSE orientation package for new tertiary students that can be adapted to the needs and local contexts of all tertiary institutions, has been developed. This course is not intended to replace a full CSE course for tertiary students but to provide the essential information so that tertiary students know where to seek additional information, support and SRHR services on or near their campuses.

The AMAZE video project aimed at 10-14-year-olds provides CSE/SRHR related information and links to services that were particularly helpful during school closures and the disruption of community-based services. To date, 20 original and adapted videos have been developed, including an original video on the basics of COVID-19 and the original award-winning HIV Disclosure video. These videos have been used with various audiences, including CSE implementers and several meetings and commemorations, for example, International Day for Persons with Disabilities. The video content is embedded in the CSE minimum-package lesson plans and is used with parents to encourage parent-child communication around CSE/SRHR matters. The AMAZE videos were also presented as a good example of providing digital CSE at the International Conference on Sexuality Education in the Digital Space.

Shortly after the global pandemic was declared, “Coronavirus and You” content was added to the TuneMe menu across all the country pages, including information on MHM, access to SRHR services and GBV. The COVID-19 content proved timely and relevant, with 11,866 views between April and December.

During hard lockdowns, TuneMe experienced triple the amount of traffic on its site, highlighting the benefits of online platforms in disseminating information and reaching large numbers of young people.

In collaboration with UNFPA New York, SYP developed a Java-based App for TuneMe. The TuneMe App has been designed using the same content management system and the same look and feel of the TuneMe mobisite. The App, which is now in the testing stage, will complement the mobisite and reach a larger number of young people who own smartphones, especially in middle-income countries. Moreover, it will serve to reduce the challenges that young people are experiencing with access to data.

TuneMe was nominated for the 4th Commonwealth Awards on digital health under the category ‘Adolescent Health’ while being recognized as a best practice for sustainability in the recently launched UN Inter-agency Framework on Digital Health Interventions With and For Young People.
**SRH and Climate Change**

To date only limited attention has been paid to the linkages between climate change and SRHR. The two issues are linked because barriers to the realization of SRHR inhibit progress toward gender equality which may, in turn, impede climate action. At the same time, the impacts of climate change may negatively affect SRHR, for example, through interruptions in sexual and reproductive health services caused by extreme weather events. Empowering young people with information about climate change and how it relates to their SRHR choices is therefore critical. To better understand the direct and indirect pathways of the impact of climate change on SRHR and to enable programme responses, a review of existing programmes worldwide that integrated aspects of SRHR and climate change was conducted with the aim of empowering and educating young people on climate change and the intersections between climate change and SRHR through CSE.

The regional SYP team established a partnership with Queen Mary University of London to review global and continental programmatic modality of integration of SRHR in climate change adaptation. As part of this work, Queen Mary developed a programming guide on best practices for the integration. A guidance note will be disseminated for use by UNFPA country offices and other relevant stakeholders in 2021.
The Safeguard Young People Programme in 2020: Country Highlights

**BOTSWANA**

SYP in BOTSWANA conducted risk communication on COVID-19 for blind and partially sighted young people. The Botswana Association for the Blind and Partially Sighted transcribed 3,000 COVID-19 and SRH messages into braille and distributed them to the blind community.

**ESWATINI**

More than 2,380 young people in ESWATINI were reached with ASRHR and leadership skills through GLOW and BRO initiatives. Moreover, more than 70,000 users were reached on TuneMe.

**LESOTHO**

In LESOTHO, approximately 40 community dialogues on child marriage were conducted in the rural areas, reaching approximately 15,000 community members with messages on eliminating child marriages.

Visually impaired young people from Botswana display COVID-19 and SRH messages adapted for them using braille.
MALAWI

41,917 persons in MALAWI were reached with CSE information through one-on-one CSE sessions, CSE forums, and radio phone-in programmes.

NAMIBIA

NAMIBIA launched the Namibian Youth Response to COVID-19 aligned to the global UNFPA/Prezi campaign. As a result, 484 youth in all 14 regions were mobilized, 121 constituencies reached, and a total of 9,680 households equipped with information on COVID-19 and SRH.

SOUTH AFRICA

In the third quarter of 2020, 929,498 individuals in SOUTH AFRICA were reached with social and behaviour change communication via social media, community radio and WhatsApp sessions.

ZAMBIA

The roll-out of the Young Safe and Smart HIV prevention and CONDOMIZE! campaigns in ZAMBIA increased access to SBCC messages in 55 districts, reaching over 100,000 young people.

ZIMBABWE

The Sista2Sista (S2S) programme in ZIMBABWE had recruited 18,909 girls by March 2020, when the onset of the COVID-19 pandemic halted further progress. Sessions resumed once COVID-19 lockdown restrictions were relaxed, leading to a cumulative annual total of 461,017 people having been exposed to S2S sessions.

CSE session in Nkhata Bay District, Malawi.
Trevor Oahile, 23, Botswana

Life under lockdown is very challenging, as we are all trying to adapt to new ways of doing things. As a university student, the lockdown has halted my studies, so I am trying to use this time to do more research and catch up on subjects I have been struggling with. I am getting more tutorials through free online courses and YouTube videos. Of course, this is quite expensive because data here is very costly, especially for us students who live on an allowance.

We haven’t experienced many health challenges in accessing sexual and reproductive health services, but many young people have stopped going to the health facilities to access these services because, due to measures introduced, it takes a very long time to get services and we are [too] impatient to stay in lines all day. Other factors that have been inhibiting young people from accessing SRH services are the closure of the youth-friendly service centres, scarcity of transport due to the lockdown, and also because of the current general fear of going to the hospitals.

Through the SYP supported radio show Don’t Get it Twisted, which I co-host every Wednesday on Yarona FM, a youthful radio station, I share information with young people on how they can protect themselves, protect others and contribute to the fight against COVID-19.

I also sensitize them on sexual and reproductive health issues, like the importance of continuing to use contraception during the lockdown to avert transmission of sexually transmitted infections including HIV, and unintended pregnancies, where to access SRH commodities, and how to take care of their mental health during these challenging times.

Since Botswana registered quite a big increase in gender-based violence cases during the lockdown, we have also been sharing information on where to report GBV, [how to find] shelters in case a GBV survivor wants a safe space, numbers to call for psychosocial support and information to sensitize men and boys on fighting GBV.

My advice to other young people is to continue accessing SRH services and using contraception, to avoid contracting sexually transmitted diseases and unintended pregnancies. I also urge young people to take the coronavirus seriously and to continue observing the lockdown protocols and follow the health regulations.”

*Trevor’s reflection was part of an SYP campaign #YouthandCOVID19 Diaries aimed at amplifying youth voices during the COVID-19 pandemic.*
SEXUAL AND REPRODUCTIVE HEALTH SERVICES FOR ALL

Only when countries have instituted effective national systems to respond to, expand and deliver quality integrated SRHR, GBV and HIV services, will adolescents and young people be truly empowered to make informed choices about their health and life more broadly.

As a result of SYP’s efforts in 2020, seven of the eight participating countries are implementing strengthened condom programming for young people. In addition, it is encouraging to see that advocacy and activist efforts paid off, with over 1.3 million adolescents and young people reached with SRHR and HIV services in the course of 2020.

MAKING STRIDES IN SRHR IN 2020 - A SNAPSHOT

- 5 countries have included ASRHR package within Universal Health Coverage.
- 5 countries are implementing the SADC SRHR Strategy.
- 3,490 pre-service and in-service providers trained in quality AYFHS delivery.
- 1,396,157 adolescents and young people reached with SRHR and HIV services.
- 801 health service delivery points offering standard package of AYFHS in project sites.
- 7 countries have strengthened condom programming for young people through evidence generation and knowledge management.
- 65,774 young people accessing HIV services.
- 37 million condoms distributed.
- 6 countries routinely reporting on the SADC SRHR Score Card.
- 6 countries with M&E systems integrated with gender and age disaggregated indicators on ASRHR.
QUALITY AND INCLUSIVE ADOLESCENT AND YOUTH-FRIENDLY HEALTH SERVICES

Drawing on lessons learned during the Ebola Virus Disease outbreak, SYP contributed to the development of the Eastern and Southern Africa Region Joint Interim Guidance on Continuity of Essential Health and Nutrition Services during the COVID-19 pandemic. The guidance aims to help countries address some of the observed challenges in ensuring continuity of essential services during the pandemic. The SYP team supported the development of the guidance, ensuring continuation of services with a dedicated section for adolescents and young people.

The SYP regional team in collaboration with relevant units in the Regional Office developed a series of internal guidance notes for Country Offices. The first guidance focused on addressing HIV related concerns in conjunction with the increasing number of unintended pregnancies and led to the development of a guidance to countries to ensure uptake of condoms during the pandemic. The guide highlighted the critical steps to be taken to provide uninterrupted access to condoms by all and, in particular, by adolescents and young people.

The second guidance focused on the broader spectrum of contraceptive services for young people with the central aim of ensuring reduction of unintended pregnancies, especially teenage pregnancies, and focusing on continuation of contraceptive services to young people during the pandemic. This guidance introduced the concept of self-care.

In 2020 UNFPA commissioned a rapid assessment on digital health and innovation in the East and Southern Africa Region. The study found that the most commonly used digital health tools related to healthcare connectivity and communication. This includes mobile messaging and data collection options (such as community health workers collecting data in the field), the delivery of health commodities through innovative means (such as drones or the use of motorbikes that utilize logistical tracking of health supplies), telemedicine for remote consultative care, and virtual learning for clinicians to enhance knowledge and fill shortages in medical capacities. These findings are key to improving innovation solutions within the region, including the TuneMe app, which could integrate artificial intelligence and other innovative technologies, especially in light of the self-care revolution.

In order to address the COVID-19 pandemic and ensure continuation of service delivery for adolescents and young people, the SYP programme is developing specific models relating to self-care. The intervention will focus on Malawi, Zambia and Zimbabwe. SYP is currently working on the terms of reference that will inform the development of the self-care models to be piloted in those countries in 2021 and 2022. The countries targeted for this intervention have already initiated dialogues with the relevant government ministries to ensure buy-in and sustainability beyond the piloting stage.

Package of services provided at Botho University in Lesotho as part of CSE.
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**LESOTHO**
More than 89,000 adolescents and young people in LESOTHO were reached with ASRHR information and services, with about 40,000 testing for HIV and receiving their results.

**MALAWI**
483,918 young people in MALAWI were provided with various youth-friendly health services in all six focus districts.

**NAMIBIA**
In partnership with the World Food Programme, the NAMIBIA SYP team distributed 6,000 dignity kits in six regions for pregnant and breastfeeding women, young girls living with HIV, and young girls living with disabilities. Dignity kits were inclusive of GBV referral pathways and Protection Against Sexual Exploitation and Abuse (PSEA) information.

**SOUTH AFRICA**
In South Africa’s KwaZulu-Natal province, 82,688 young people between the ages of 10 and 19, were able to access health services, while in the Eastern Cape, 13,065 benefitted from access to SYP-mentored health facilities.

**ZAMBIA**
- 377 health community workers were trained to provide integrated ASRHR/HIV/SGBV services;
- SGBV services in 20 health facilities were strengthened;
- 60,680 young people accessed ASRH services;
- 21,815 people were reached with adolescent youth-friendly services; and
- 216,000 condoms were distributed by peer educators.

**ZIMBABWE**
By the third quarter of 2020, all the targeted 24 Registered General Nurses (RGNs) and 22 Midwifery Training Schools in ZIMBABWE had ASRH on their lesson plans resulting in 632 RGNs and 314 student midwives receiving ASRH sessions.
CHALLENGES AND OPPORTUNITIES

Despite the implementation challenges ushered in by the coronavirus pandemic, the difficulties presented opportunities for the SYP Programme to look into new and innovative implementation strategies. Only in limited cases — where an alternative methodology of delivery of the programme was not possible — did the interventions have to be deferred to 2021.

COVID-19 presented several obstacles to the advocacy work of young people in the region. Alternative approaches to advocacy efforts allowed for continuity, but at the same time, reduced the ability to reach a larger number of stakeholders with a deeper engagement. A survey conducted at the beginning of the pandemic showed, among other concerns, that young people/leaders seemed to be significantly affected by COVID-19. Their mental health has been affected, also impacting their ability to act as advocates.

LESSONS LEARNED

Young people, specifically young leaders, are resilient and very resourceful in situations of emergency and uncertainty. SYP’s support to youth networks and youth-led organizations can be pivotal in ensuring youth-led accountability and participation regardless of the context or the challenges. The COVID-19 pandemic has emphasized the need to look into employment and job creation as a priority. The integration of SRHR in economic empowerment initiatives has the potential to strengthen programmes and policies and ensure results in both areas.

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Survival packages being distributed in Mokhotlong, Lesotho after discussions with women and girls on child marriage, gender-based violence and the impact of COVID-19.
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