

## ABSTRACT

### **Proposed Track Title: Fertility/Sexual Reproductive Health – Adolescent Sexual and Reproductive Health**

*‘Analyzing YPE4AH project effort in improving the sexual and reproductive health of out of school adolescents in Lagos and Kano state through holistic youth friendly services.’*

**Affiliations:** DAI, USAID, YEDI

**Authors names:** *Mfonabasi Nancy Ufia, Babajide Daini, Chukwudike Akanegbu*

**Conference Track:** Fertility/Sexual Reproductive Health: Adolescent Sexual and Reproductive Health (Session 416)

#### **Brief Summary (less than 150 words):**

In sub-Saharan Africa, Nigeria is the most populous country with a thriving population of young people who struggle with barriers to accessing accurate information or services on their sexual and reproductive health and so act based on passed down tales or feelings. The YPE4AH project is a key player in this field seeking to redress this struggle and has a current reach of about 40,000 plus out of school adolescents in Lagos and Kano state between the ages of 15 – 19. Holistically approaching these three areas - i) Life skills, ii) Leadership and iii) Livelihood through trainings in a safe space within their communities and utilizing pre and posttest surveys, it is learned that adolescents make better sexual and reproductive health choices when they are better informed and attended to.

#### **Introduction/Objectives:**

Globally, the onset of adolescence comes with changes – physical and emotional which in turn opens new levels of vulnerabilities exposing young people to human right violations primarily in the areas of gender-based violence, early marriage and childbearing, nutritional loss, mental health struggles and constant self-doubt. These have been further fueled over the years by the existing gap in the adolescent health space which has received little to no attention as required and consequently has a huge effect on the state of the society. In sub-Saharan Africa, Nigeria is the most populous country with a thriving population of young people. Yet, this vulnerable group face barriers to accessing accurate information or services on their reproductive health and struggle with exercising their rights on early marriage and unwanted sexual advances which has the ripple effect of physical and emotional/sexual damage (maternal death, social stigma, isolation, social rejection).

This paper analyses the impact of the YPE4AH project on the reproductive and sexual health of a vulnerable group of adolescents who are between the ages of 15 – 19 and out of school. Over the years, this impact has been made through interventions across Nigeria in Lagos and Kano states – the two largest commercial hubs of the country.

#### **Methodology:**

Utilizing data gathered across the implementing states at inception and working with relevant ministries, departments, and agencies in the governments of these states, the project functions through three main domains targeted at ensuring positive wellbeing in the reproductive health of these young ones. These domains are also measurable objectives and include: *i) Life Skills, ii) Leadership, and iii) Livelihood*. Tackling the areas within these domains redirects the adolescents and reorients their minds on what they are capable of beyond their background or poor

reproductive health experiences. Over a period of twelve days and with subsequent quarterly mentoring meetings within safe spaces in their communities, they are extensively taught on critical *Life Skills* to improve skills for healthy living and future planning which covers healthy and unhealthy relationships, communication, assertiveness, gender norms, menstrual hygiene, *Leadership* skills which involves building their capacity on taking up leadership roles, advocacy, civic duties and participation and getting them to relate with stakeholders from their communities to the government level for advocacy on issues affecting them and then *Livelihood*, increasing youth workforce readiness; better access to opportunities and entrepreneurship to address socioeconomic determinants of adolescent health. A survey is conducted after these sessions (pre and posttests) and is aimed at measuring the impact of the trainings and the level of knowledge before and after the trainings. The data from this survey is used to measure the change in thinking recorded in each adolescent, the possible pathway for growth, development, and life planning, and importantly their stance on sexual and reproductive information, access, rights and how it can be improved or encouraged.

### **Results:**

At the time of this analysis recorded as of December 2023, a total of 30,785 girls and 28,685 boys have graduated from the Life Skills training, a record of 45,597 new FP users, 32,630 boys and 33,630 girls have received FP services and from the professional health service providers present in the hubs within their communities and referred where applicable, 2,292 adolescents graduated from the Leadership trainings across Lagos and Kano and 12,211 girls and 6,787 boys have received counselling on Gender Based Violence (GBV) from health service providers at the hubs. 14,893 adolescents have accessed FP services to prevent GBV. 1,215 adolescents have been granted livelihood opportunities on the project to advance their health and wellbeing.

Prior to the presence of the project in these six local government areas across the implementing states, the FP uptake, awareness, information, and access among adolescents were non-existent. The young ones were left to explore and live based off experiences and tales that had been shared with them. The hubs, however, pose a safe space for the adolescents to walk in, receive counselling, engage with the health service providers, share their thoughts, get heard and can always return for consultation visits or to just for rest and recreation. They previously had reservations on the quality of care they received from their public health care systems and how they mostly felt misunderstood or judged. However, going by the current numbers at the hubs, the adolescents have improved on speaking about their sexual and reproductive health, seeking help, adopting methods to ensure they live well and make better long-term choices. Not just the young ones, parents who are secondary stakeholders on the project, have also been sensitized through town hall meetings, quarterly engagement meetings and outreaches. These parents have now become “ambassadors” of the project, sharing this information with other parents, accompanying their children to make some of these decisions, referring other adolescents in their communities to the hubs to access services, build their capacity and explore livelihood opportunities as well.

### **Lessons Learned:**

Though a slow progress, owing to the rights and choices the adolescents have the power to make, project implementation has revealed that adolescents whether married or unmarried make better choices when they are accurately informed and properly attended to; coupled with the sessions on life skills and future planning, accurate information on their sexual rights, access to opportunities and leadership skills. Rating based on their responses in pre and posttests (which is a survey conducted to measure the adolescent’s knowledge level before and after the life skills trainings)

sexual and reproductive health and rights has evolved in important ways and they are less likely to have sex with a partner who they are not married to or living with and more likely to use condoms when they are sexually active.

Critical sexual and reproductive health questions asked during the pre and posttest in the Life Skills sessions include:

*'I know how to communicate effectively with the opposite sex'*

*'Condoms are not the only contraceptive method that protects against pregnancy as well as STIs and HIV.'*

*'I know where to get support services for me or someone else for GBV or rape'*

*'I know the steps I need to take in order to achieve the goals in my life.'*

*'People who abuse alcohol are more likely to engage in risky behaviors such as violence or unprotected sex.'*

*'I know at least three methods to avoid an unwanted pregnancy.'*

*'I know where to get support services for me or someone else on contraceptive use'*

*'I know where to go if I have questions about the changes happening in my body'*

*'Boys and men should share all household chores such as cooking and fetching water.'*

*'It's a man's responsibility to make decisions in a relationship.'*

*'I can make the choice to protect myself from pregnancy and STIs if I have sex.'*

*'I can abstain from sex till I am older even though it is difficult.'*

*'I don't always have to do what people expect because I am a boy or girl.'*

*'It is okay for a man to hit his girlfriend.'*

*'I have a supporter in my life who I can go to if I need help.'*

*'I have the right to say no to sex no matter who asks me.'*

*'I intend to use contraception soon/when I have need for the service.'*

*'Women should have equal rights with men and receive the same intervention as men do.'*

*'On the whole, men make better political leaders than women and should be elected rather than women.'*

*'When jobs are scarce, men should have more right to a job than women.'*

### **Conclusion:**

These best practices utilizing the ecosystem of a safe space for young people to thrive and interact while getting vital life learnings, access to livelihood opportunities, safe spaces, access to one-on-one counselling and FP services, SKILLZ sessions on leadership, and access to government parastatals are exigent tools to improving the health and wellbeing of adolescents and ensuring improved health and wellbeing for the adolescents to becoming more for themselves and their societies. There is more investment and a growing evidence-base, with committed advocacy movements and strong governmental responses in a small but increasing number of countries. This presents new opportunities for all adolescents to achieve and exercise their full potential. Adolescents have a right to make decisions governing their bodies and to access services that support those rights.