

Training course in adolescent sexual and reproductive  
health 2020

Priorities to build on the progress made for the next 25  
years, with a particular focus on the SDGs

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### **Question 1.1**

**What are two factors that deter the provision of contraception by health workers to adolescents?**

1. Inadequate knowledge and skills among adolescents.
2. Existing misconceptions about contraceptives among adolescents. For example in Tanzania health workers have misconception that adolescents should not start using contraception before marriage and hence, they may fear disclosing their sexual activity. (1)

### **Question 1.2**

**What are two actions that could be taken to address these factors?**

1. Training health workers on methods of contraception, including emergency contraception, and the advantages and disadvantages of each.
2. Training health workers on good counseling skills to adolescents to avoid judgmental statements and thinking towards contraception use among adolescents. (1)

### **Question 2**

**When adolescents use contraceptives, they are more likely to use them for shorter periods than adults. They are also more likely than adults to discontinue use. One reason for this is that they are particularly sensitive to side effects. Another reason is that they may not receive proper counselling and therefore may not know what to anticipate regarding side effects. What are two implications of this for health workers who are supporting adolescents to sustain contraceptive use?**

Health workers should provide support to adolescents using contraceptives to promote consistent and continued use. They should also actively manage side effects that rise to adolescents as the results of using contraceptives. (1)

### **Question 3.1**

**Which one of the emerging opportunities noted in [Paper 4](#) do you feel has the most potential to advance ASRHR in your country? Briefly explain your answer.**

**Increased investment in ASRHR:**

This is the most potential in advancing the ASRHR services in Tanzania. Different funds both domestic and external funds are very important in improving the access of SRHR information and services among adolescents. With heavy investment in ASRHR the country will be able to end child marriage, preventing and treating adolescents affected with HIV/AIDS, while the improvement of health facilities will automatically improve the access of contraceptives among adolescents in the country. (2)

### **Question 3.2**

**Which one of the persistent and/or new challenges noted in paper 4 do you feel creates the biggest barriers to advancing ASRHR in your country? Briefly explain your answer.**

Entrenched gender inequality:

In Tanzania, we still witness gender inequalities norms in many of the societies in which the girl child is taken as source of income for the family and hence discriminated from getting education compared to the boy child. With this discrimination, girls are exposed to be vulnerable to gender based violence compared to boys. (2)

### **Question 4**

**What are two of the suggested actions that can be taken to mobilize and make full use of political and social support for ASRHR policies and programmes?**

1. We must demonstrate that success is possible through evidence-based action, strong leadership & management & perseverance, & use this support to improve adolescent health more generally. This may be applied where there is political & social support for ASRHR.
2. We must make the case for action using acceptable entry points and/or leveraging specific events/moments in time. This is possible where both political and social support commitment is weak. (2)

### **Question 5**

**Mention one suggested action each that can be taken to increase external funding AND domestic funding for ASRHR while making effective use of the available resources to demonstrate impact.**

Suggestion to increase external funding: Using the resources to address intersecting areas of ASRHR & areas of importance to ASRHR that are not well-funded.

Suggestion to increase domestic funding: Assigning dedicated line items in health & other sectors' budgets for ASRHR-related activities. (2)

### **Question 6**

**What are two of the suggested actions that can be taken to develop, communicate, apply, & monitor enabling & protective laws/policies for ASRHR?**

1. To create wider awareness of these legal provisions so that adolescents and their communities know their rights or entitlements and can push for accountability.
2. To identify the legal or policy barriers that poses the greatest barriers to ASRHR & work to change them. (2)

### **Question 7**

**Is there anything that surprised you in the score card for the country you selected? If you had the authority to make any changes to the laws and policies in the country, what are two changes you would make to improve young people's access to contraception?**

One thing surprised is that in Tanzania we have the laws and policy that allows individual decisions on the use of contraceptives regardless of their age or any other restrictions from parents, spouses or health providers. Unfortunately, some health providers have been hindering the access of contraceptives to young people below the age of 18 years which is contrary to the existing laws, policies and regulations in the country. (3)

Actions to be taken:

- Identify the legal/policy barriers that pose the greatest barriers to ASRHR & work to change them.
- Harmonizing all laws, policies and regulations that contradict themselves in the provision of health services to the adolescents and youth. (2)

### **Question 8**

**What are three of the suggested actions that can be taken to use & improve ASRHR data & evidence to strengthen advocacy, policies, & programmes?**

1. Improve the availability and dissemination of evidence
2. Support decision-makers to develop evidence-based strategies and investment cases
3. Address evidence gaps, especially through implementation research on the cost of interventions, adaptation of interventions to different settings, and optimization of interventions in real-life settings. (2)

### **Question 9**

**What are two of the suggested actions that can be taken to manage the implementation of ASRHR strategies at scale with quality & equity?**

1. Ensure that adolescents are considered within broader health, education, and protection system strengthening efforts.
2. Move beyond one-off, off-site trainings to improve frontline worker capacity, comfort, and motivation to provide ASRHR services and interventions. (2)

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