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Angola, like many countries, struggles to provide good sexual and reproductive health (SRH), especially for youth. SRH is a “state of physical, emotional, mental, and social well-being related to sexuality and to the reproductive system” ([UNFPA](#) <sup>[2]</sup>).

Good SRH implies that both men and women have a right to decide about their sexual identity, sex life, and if and when to have children.

-Angola has one of the highest rates of adolescent pregnancy and childbirth in sub-Saharan Africa, with an adolescent fertility rate of 192 per 1,000 women. Among those aged 15-24 years, 43 percent have sex by the age of 15 years, Angola’s 2010 Knowledge, Attitudes, and Practices survey revealed – but only 51 percent of male and 38 percent of female youth know that condom use is a method of HIV prevention. In Luanda, Angola’s most populous province, 12 percent of pregnant women are adolescents, according to the Plano Nacional de

Desenvolvimento Sanitário (PNDS) 2012-2025.

While health authorities promote the provision of SRH services, the uptake of these services by young people [3] remains low.

Very few outlets of information and SRH service provision exist for Angolan youth. Youth receive inadequate SRH education in schools, increasing their risk of early pregnancy, STIs, sexual abuse, and exploitation. SRH messages often focus solely on physical issues, such as prevention of sexually-transmitted infections (STI) and family planning—topics that may not resonate with youth—and do not adequately address the social and psychological aspects of sexuality or how to initiate and maintain a healthy sex life. Other barriers include the social stigma of accessing SRH services, especially for young women who may not want to be perceived as being sexually active. Health facilities' hours of operations often coincide with schools hours, and transport costs can also create barriers to access.

Says Odete Fernandes, Executive Director of Acção Angolana para a Mulher (AAM), an Angolan civil society organization:

When we ask students who is sexually active or has already had their first sexual relationship at our sensitization sessions, often the majority of them raise their hands.

This demonstrates that early sexual debut is common and regarded as something to be proud of. However, young people's knowledge of sexual and reproductive health is quite limited.

SRH includes family planning; prevention, care, and treatment of sexually-transmitted infections; and prevention of gender-based violence; and, often is integrated into health services to provide holistic, comprehensive care.

The Angolan government partners with AAM and other organizations in civil society and the private sector to provide comprehensive SRH policies and services, especially to reach underserved areas and population groups.

### **Community, peer-based approach to SRH among youth in Luanda**

AAM relies on a network of approximately 30 youth activists to conduct sensitization activities among their peers in schools and youth clubs. New activists join the network after participating in AAM sensitization sessions—becoming change agents who share the knowledge they have received. This system of knowledge transfer is effective because youth identify with their peers and are more open to expressing and discussing their concerns and questions in a non-judgmental environment.

AAM's sensitization sessions, which typically last 40 minutes, provide an introduction to sexual and reproductive health, including male and female reproductive health, as well as information on methods of transmission and prevention of STIs, family planning, and gender-based violence. (AAM particularly emphasizes survivor's rights under Angola's Law on Domestic Violence [4].) AAM has been promoting equal rights among men and women since 1997.

The youth activists then answer questions and facilitate discussions with participants.

In 2014, Management Sciences for Health (MSH) through USAID's Building Local Capacity for Delivery of HIV Services in Southern Africa Project (BLC) supported AAM to facilitate sensitization activities in 15 schools in the districts of Sambizanga and Kilamba Kiayi in Luanda. This partnership provided AAM with financial and organizational support to: 1) Reach 13,137 individuals with messages on HIV prevention, gender-based violence, and women's rights; 2) Reach 2,561 individuals through community campaigns on HIV prevention; and 3) Train 25 youth to be school-based peer educators.

AAM's youth activists encourage students to form youth clubs at their schools to educate and engage their peers on SRH, providing further training on SRH and ongoing support.

### **Developing a SRH manual for working with Angolan youth**

After identifying the need for materials and guidance on SRH in the country, and consulting with the National Public Health Directorate in the Ministry of Health's Department of Sexual and Reproductive Health, AAM, with support from MSH and partners, led the development of a sexual and reproductive health manual for CSOs. The manual is organized into seven topics based on the most frequently asked questions during AAM's HIV prevention presentations in schools. These include: 1) Sexual and reproductive health rights; 2) Gender and gender-based violence; 3) Adolescence and sexuality; 4) Sexually-transmitted infections and HIV; 5) Menstruation, pregnancy, and antenatal care; 6) Pregnancy during adolescence and unsafe abortions; and 7) Family planning and modern contraceptive methods.

The manual includes activities and practical exercises appropriate for a classroom setting, as well as a pre- and post-assessment of knowledge.

MSH through BLC will support AAM to facilitate a workshop to validate the manual, as well as a guide on gender-based violence, this month. The workshop will convene 30 representatives from civil society and government to review and evaluate the content and presentation for future use. The manual will subsequently be distributed to other CSOs in Angola with support from the Angola Network of AIDS Service Organizations (ANASO) and the Ministry of Health.

AAM plans to scale up their activities for youth, including working with ANASO and school officials to provide HIV counseling and testing (HCT) at schools, and conducting surveys to measure adolescents' attitudes and knowledge of SRH to better inform AAM's interventions.

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#### **Links**

[1] <http://www.msh.org/users/ana-diaz>

[2] [http://www.unfpa.org/sites/default/files/pub-pdf/SRH\\_Framework.pdf](http://www.unfpa.org/sites/default/files/pub-pdf/SRH_Framework.pdf)

[3] [http://www.ippf.org/sites/default/files/matching\\_needs\\_with\\_systems.pdf](http://www.ippf.org/sites/default/files/matching_needs_with_systems.pdf)

[4] <http://www.minfam.gov.ao/VerNoticia.aspx?id=24815>