



POUR ELLE

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**18TH GENERAL MEMBERSHIP MEETING OF THE
REPRODUCTIVE HEALTH SUPPLIES COALITION**

Young People and Contraceptive Access - advocacy and communications toolkit

David Eeckhout - 20/03/2018



Reproductive Health
SUPPLIES COALITION

#ITSABOUTSUPPLIES #RHSUPPLIES2018

Advocacy and Communication toolkit

What?

- Handbook to support advocacy on improving issues related to young people's access to RH supplies.
- Developed to better understand what a youth-centered approach to RH supplies entails.
- Workshop to translate Youth Caucus key messages into change for young people in country
- Overview of best practices and innovative ways of improving adolescents' access to RH supplies

Why are young people a “special case”?

“Young women face a significantly higher burden of unmet need for contraception than older women do”

Unmet need in 31
developing countries
(2006 -2014):

- 15-24 years: 31 percent
- 24-49 years: 24 percent



Why are young people a “special case”?

The barriers young people face when accessing

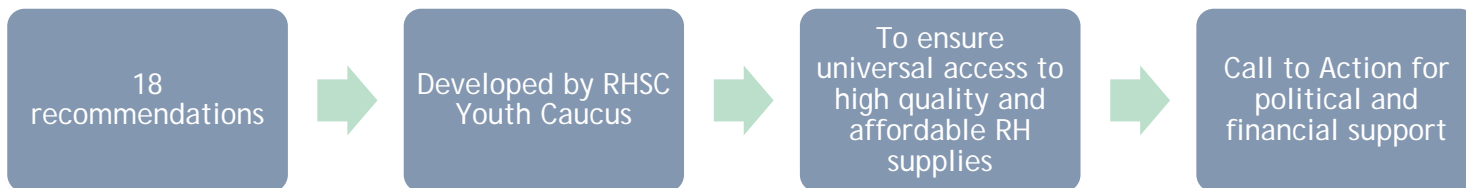
Legal restrictions

- Parental consent laws
- Age restrictions to emergency contraceptives
- Age restrictions to sexual activity
- Limited Freedom of movement

Societal restrictions

- Misinformation on the absence of legal restrictions
- Denying access based on personal beliefs about adolescent sexuality
- Financial dependency

The RSCH Youth Caucus key messages



Advocacy toolkit

7 steps to adapt the key messages to your context:

Gathering data on your region

Selecting focus messages

Identify target policy makers

Adapt your messages to the audience

Analyze the policy making process and identify advocacy opportunities

Develop an action plan

Monitoring and evaluation



Key messages workshop

Translate key messages into into change for young people in country

Key messages workshop

Today: workshop on how to adapt the key messages to a specific context

Two cases:

- Uganda
- Pakistan (focused on Sindh region)

Example in the slides:

- Belgium



Gather information

Research adolescent contraceptive use in your country:

National policy documents:

- Demographics and health Surveys
- FP Costed Implementation Plans
- National Guidelines and Service Standards for Reproductive Health Services,
- National Education Framework (inclusion of sexuality education in the curriculum)

International review and monitoring tools

- WHO adolescent Contraceptive Use country factsheets
- PRB Youth Family Planning Scorecard
- UNFPA's Adolescent and Youth Dashboard
- FP2020 Focus Country homepages

Belgium

- 58 percent of adolescents aged 15-21 are using a modern contraceptive method (2015)
- Among this group, 91 percent uses the pill as their preferred method. Among the remaining adolescents, the hormonal implant is the most popular, followed by hormonal patch, the vaginal ring and the copper IUD.
- Adolescent pregnancy: 9 births per 1000 girls aged 15-19 (2010)
- Both LGN-EC and UPA-EC are available directly from pharmacist without prescription
- Legal abortion is available until 12 weeks (third party payment system integrated in abortion services)

Main Challenges

- No third party payment system for contraceptive consultations (financial dependency exists)
- Adolescents with a migrant background have worse health outcomes, higher prevalence of STI's and unplanned pregnancies.

Selecting focus messages

13

Reach more young people by setting up confidential, affordable youth-friendly and youth-led health settings where they can access supplies, not only through the traditional youth-friendly corners but also via creative 'new' spaces that young people may be more likely to attend (schools, private sector facilities, pharmacies, mobile outreach, etc.)

Do you consider this message as an issue that is relevant for the young people in your country/region? Why?

Yes, Belgium has a good standard of RH services and easy access to contraceptive supplies. Access points can be more confidential. Products are reimbursed, but not in the most effective way.

What is the current situation in your country/region regarding this issue?

Young people have free access to quality information about contraceptive supplies and services. But reimbursement is still indirect and after the consultation. This limits the independence of young and their anonymity.

Are there still gaps that need to be addressed?

Yes, the reimbursement system needs to be direct, meaning adolescents only pay the part that is not reimbursed during a consultation instead of the full price. Now they need to recover the reimbursement afterwards.

Are there other organizations working on this issue?

Yes, Flemish expertise centre for sexual health has been advocating the introduction of a post ante third party payment system for years.

Rank the message based on relevance for your organization to address this.

1

2



3

4

5

0 (not important at all) - 5 (very important)

Identifying target policy makers

POLICY MAKER MATRIX	Policy Maker: Minister of Health	Policy Maker:
Are these policy makers working around youth and/or RH supplies issues?	Mainly health issues. no clear references to young people in her health framework 2014-2019 Focus on budgeting/efficiency	
How much influence do these policy makers have on youth and/or RH supplies issues?	A lot, the minister works with the social partners and medical association to determine the circumstances for RH services	
What is their attitude towards increasing access to RH supplies for young people?	The expansion of youth services is not a priority item. Many youth RH topics have been on the table for many years without progress.	
Does your organisation has a (in)direct connection to the policy maker and is it easy to reach out to them?	Yes, there is a direct and indirect connection tot this policy maker. Regular meetings with members of the Ministry of Health.	
Rank the message based on relevance for your organization to address this.	 0 (not important at all) - 5 (very important)	 0 (not important at all) - 5 (very important)

TO DO

- Start by identifying the most important policy makers related to young people's reproductive health.

Adapt messages to the audience

TO DO

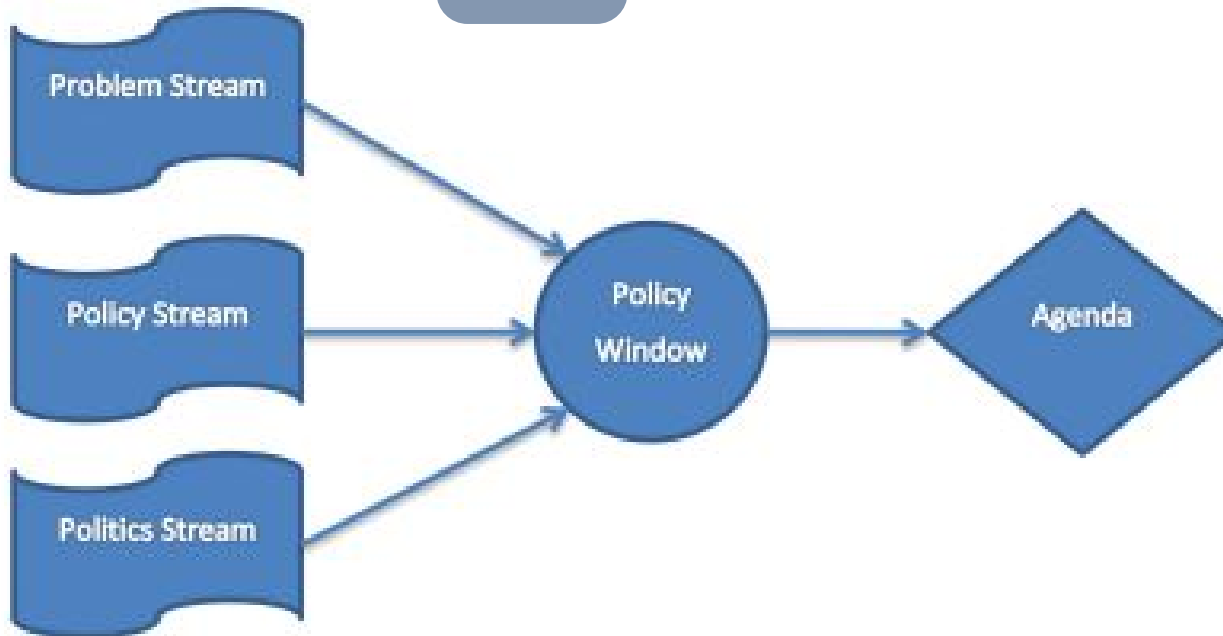
- Identify the possible priorities/main interests of your selected policy maker. Write down how you will frame your key message to get the best possible result.

AUDIENCE	PRIORITIES / MAIN INTEREST	RELATED KEY MESSAGES
Minister of Health	<p>Strong focus on making the health system sustainable and affordable in the coming years. making sure money is used correctly and nothing is "for free."</p> <p>Strong focus on budgeting and reforms</p>	<p>Focus on the potential gains from a more efficient and confidential payment model for adolescent RH consultations or RH services for adolescents</p>

Analyze the policy making process and identify advocacy opportunities

TO DO

- Write down to one to three advocacy opportunities you used in the past to draw attention to your projects/work.



Develop an action plan

TO DO

- Write down some activities that could help advance your key message (think about indicators if you have time to spare).

ACTIVITIES	INDICATORS	PARTNERS INVOLVED	TIMELINE
Conduct a study to calculate the possible financial gains from a direct payment 3 rd party payment system for adolescents in relation to SRH consultations.	Finalize study Organize study day with the MOH and other stakeholders Get at least 5 media exposures	MOH Healthcare syndicates Regional governments Ambassade (youth network)	6 months for the study 6 months for the campaign

Monitoring and evaluation

Monitoring

- What did not work well and should be stopped?
- What worked well and should be continued in the future?
- Are your indicators still representative for your activities?
- What new activity could help achieve your goals and objectives?

MONITORING AND EVALUATING THE ACTION PLAN	Activity:	Activity:
Which of your objectives are you reaching?		
Are you falling behind on certain objectives, and if so, why?		
Do the indicators still accurately reflect what you want to track? If not, can you adapt them more to your needs?		
Has the collaboration with partners been helpful? Or rather an obstacle?		
Is the timeline still realistic? If not, what is the reason for this?		
What are barriers to success?		
What facilitated success?		

Monitoring and evaluation

Evaluation

- Analyse the final results of the activities and compare this what you set out to do. This will help to determine next steps, provide recommendations for future actions based on lessons learned

ACTIVITIES	INDICATORS	WHAT WORKED WELL?	WHAT DIDN'T WORK WELL?	OVERALL CONCLUSION	WHAT NEW ACTIVITY COULD HELP ACHIEVE YOUR GOALS AND OBJECTIVES?

Let's get our hands dirty!





Stay in touch!

As the RHSC we are interested to hear about the advocacy work you have done around the key messages and would be happy to include any suggestions or recommendations in our future work.

Please inform us:

Emilie Peeters (Advocacy Officer, RHSC), epeeters@rhsupplies.org