

# Third Youth Consultation on Reproductive Health Supplies

Ouagadougou Partnership Annual Meeting,  
Abidjan, Côte d'Ivoire



# Introduction

At the Reproductive Health Supplies Coalition's General Membership Meeting in Oslo in October 2015, a clear call was heard for greater attention to young people's needs. The Coalition acted speedily. Joining forces with young members, a concept note was drafted on potential youth activities. One of the activities is to organize consultations with young people to ensure full participation and decision making.

Since then, a number of consultations have been held with youth-led organizations, the first being in December 2016 in Kampala (Uganda), in collaboration with the Allied Youth Initiative and SAMASHA Medical Foundation. More than 20 young people from diverse organizations in different regions in Uganda attended the consultation, which attempted to register young people's priorities in terms of access to reproductive health supplies.

The second consultation was held during the International Conference on Family Planning (ICFP) in Bali (Indonesia) in January 2016. Twenty-five young people from all over the world came together to discuss reproductive health supplies priorities for young people.

This report gives an overview of the 3rd RHSC youth consultation that was held during the 5th Ouagadougou Partnership Annual Meeting in Abidjan (Côte d'Ivoire) in December 2017. Thirty FP Youth Ambassadors from all over francophone West Africa came to share their ideas on how the ideal contraceptive product should look like.

For further information, please contact Emilie Peeters, Advocacy Officer at the Reproductive Health Supplies Coalition ([epeeters@rhsupplies.org](mailto:epeeters@rhsupplies.org)).

## Meeting agenda

<b>15:00-15:30</b>	Registration
<b>15:30-15:35</b>	Welcome and objectives of the meeting
<b>15:35-15:40</b>	Introduction to the Reproductive Health Supplies Coalition
<b>15:45-16:15</b>	Defining and discussing reproductive health supplies
<b>16:15-16:30</b>	Outcomes of the questionnaire
<b>16:30-17:15</b>	Brainstorm on the 'ideal' contraceptive method
<b>17:15-17:30</b>	A call to action & closing

# Meeting Report

## Welcome and objectives of the meeting

The objective of this consultation is to have a better understanding of the use of contraceptives among young people, the barriers they face and the specific needs they have. The consultation will be structured in three parts:

1. Looking at the methods that exist
2. Identifying the participants' method choice and broadening it to young people more in general
3. Exploring what an ideal contraceptive method might look like

The report from this consultation will be used to guide RHSC's work with governments, manufacturers and researchers in the future.

## Introduction to the Reproductive Health Supplies Coalition

Emilie explained the Coalition's structure and mission, and its commitment to making reproductive health (RH) supplies accessible to all. She clarified the RHSC Youth Discussion Group, its members, focus and activities.



## Discussing different reproductive health supplies

The group was introduced to a long list of contraceptive methods, proper usage, and details of protection.

The group had knowledge of male and female condoms, the contraceptive pill, the patch, implants, injectables, emergency contraceptives, the copper IUD, sterilization, and traditional contraceptive methods.

The group had little knowledge of the vaginal ring, auto injectables, and hormonal IUDs.



### Young People's Response

- › In most of the countries, sterilization is only performed if the woman's health would be endangered were she to become pregnant again. Men are still very reluctant to undergo sterilization.
- › Everyone knows natural contraceptive methods are risky, but still they are used very regularly by young people.
- › Why does research on male contraceptives stop when they discover some negative side-effects, while most women experience these side-effects every month? Men should take their responsibility and products should be much more focused on men.
- › Men often like female condoms but women don't. You cannot use all positions when using it and it is sometimes difficult to insert it without help from someone else.

## Defining reproductive health supplies

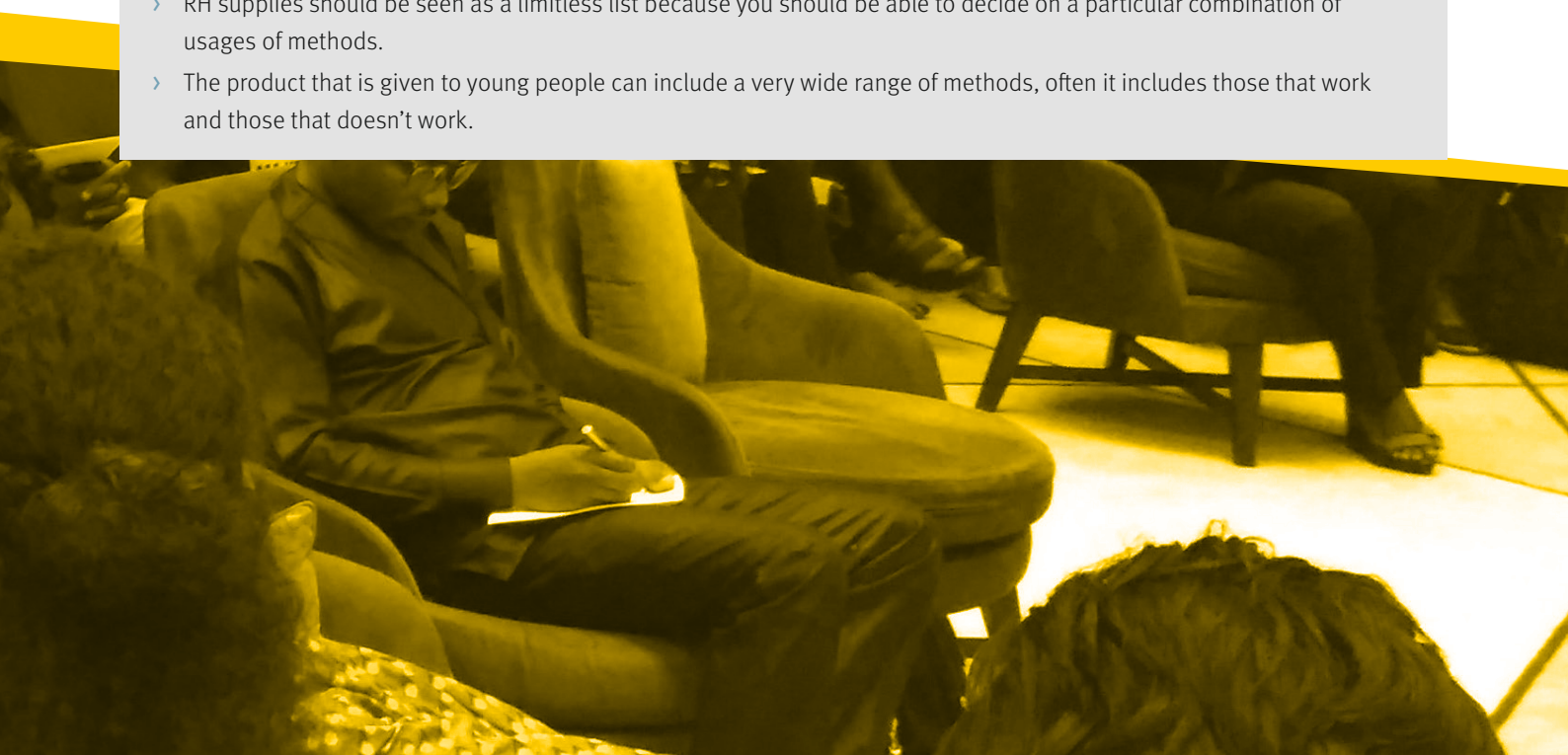
The Coalition uses the following definition of reproductive health supplies:

“Any material or consumable needed to provide reproductive health services. This includes, but is not necessarily limited to, contraceptives for family planning, drugs to treat sexually transmitted infections and HIV/AIDS, and equipment such as that used for safe delivery.”



### Young People's Response

- › RH supplies should be seen as a limitless list because you should be able to decide on a particular combination of usages of methods.
- › The product that is given to young people can include a very wide range of methods, often it includes those that work and those that doesn't work.





## Outcomes of the survey

Prior to the consultation, the participants were asked to fill in an online anonymous questionnaire related to their own contraceptive use and how they think their peers use contraceptives. 18 out of the 30 participants filled in the questionnaire, half of them were female and half of them were male. Half of them were between the ages of 19 and 25 and half of them between 26 and 35. The results were presented to the group. Here are the most important:

Among participants, **male condoms and contraceptive pills** are mostly used. However, the participants imagined that their peers also used emergency contraceptives.

**Male condoms** are most-used among participants because they:

- › are strong
- › do not interfere with pleasure
- › provide double protection against unintended pregnancies and STIs/HIV
- › are practical and easy to use

A smaller group uses **implants** because they are discreet.

**73.3% of the participants are satisfied with the product they use.**



All of them **are convinced they use their contraceptive method correctly** as prescribed but only 75% of them use their method consistently. Interestingly, 75% of them believe their peers are not using the method correctly. Reasons for their peers' perceived behavior can be:

- › Ignorance
- › accessibility issues
- › stigma
- › lack of information
- › high costs

Who is informed about **the product they are using?**

- › partner (86.6%)
- › friends (50%)
- › brothers/sisters (50%)
- › parents (13.3%)

**93.3% have made their own decision to use a certain contraceptive method.**

**Partners seem to have had the most influence on their choice of contraceptive product.** But when it comes to their peers, participants think friends have the most influence on their peers.

**80% says the choice of method is not influenced by the type of relationship they have** (for example, a long-term relationship, a new relationship, only sexual intercourse with no planned relationship, etc).

**Only 26.6% of participants have experienced stigma** because of the use of contraceptives but they think 73.3% of their peers experience stigma. Reasons for stigma can be:

- › Contraceptive use by young people is met with disapproval
- › Contraceptive use is not in line with cultural and religious values
- › Contraceptive use is thought to suggest that the user is a sex worker or has multiple partners
- › Sexuality for young people is frowned upon

**66.6% don't experience any pain or impact on their mood when using its contraceptive method.**

**73.3% don't see any (negative nor positive) effect on their own sexual pleasure** when using a contraceptive method and 61.5% don't see an effect on their partner's sexual pleasure.

**Participants are convinced that young people get information on contraceptives mainly from friends** and in some cases through peer educators or Youth NGOs working on the issue.

## Blue Sky Thinking about the ‘ideal’ contraceptive method

The group was asked to think outside the box (forget about what is possible or what is affordable) and brainstorm on what an ideal contraceptive would look like. It could be what they personally thought or what they thought young people in general would need. The aim was really to get ideas rolling.



### Young People’s Response

- › A pill that women can insert into their vagina that protects against HIV/STI and unintended pregnancies. The pill dissolves and so cannot be detected during sex.
- › A cream men put on their penis that becomes a membrane to protect against HIV/STI and unintended pregnancies.
- › A method that can be used very discreetly so no one knows you are using it.
- › A method that doesn’t have impact on menstruation nor on future fertility.
- › A method that makes women feel like they’re ‘in paradise’ because it increases sexual pleasure.
- › A method without counter effects, wounds, or rubber that irritates; one that feels like there is no product used.
- › A paper with mint taste that you can wrap around the penis and use as protection. Afterwards you can eat it.
- › Food with a good taste that you can eat and that keeps you protected from HIV/STI’s and unintended pregnancies.
- › One method that can be used by men and women depending who feels like it. One day it can be the man, the next day the woman can use it.
- › We need to think about environment-friendly products, avoid methods that pollute and think about more sustainable products. Like a gel or something you can eat.
- › Chewing gum that protects against pregnancies and HIV/STI.
- › Contraceptive pills for men.

## Call to Action and Closing

While global movements such as the Sustainable Development Goals and the new Global Strategy for women’s, children’s and adolescents’ health (2016-2030) from ‘Every Women, Every Child’ are focusing particular on young people, young people’s perspective on reproductive health and rights remains very unclear. Securing access to family planning products for young people is crucial and cannot be ignored.

This consultation is not the end of the process. The outcomes and interesting ideas will be used within RHSC to discuss with researchers and manufacturers to see what is feasible and what idea might lead to a new innovation. It will guide future work of the RHSC Youth Caucus.

The Reproductive Health Supplies Coalition seeks more youth-led organizations to work on this dedicated work stream, and to become members of the Coalition. The Coalition is committed to building a strong platform incorporating youth voices, in order to address young people’s reproductive health supplies issues.

The Coalition is also planning to organize more consultations on this elsewhere in the world. Please let Emilie Peeters know if you would be interested in joining the Coalition’s work and/or organizing a consultation in your country via [epeeters@rhsupplies.org](mailto:epeeters@rhsupplies.org).

# Annex 1: List of participants

<b>Name</b>	<b>Country</b>
Sanne Thijssen	The Netherlands
Oumou Salif Touré	Mali
Ebe Chibuese Halima	Niger
Aboubacar Dan Lady AbdoulRazak	Niger
Djifa Isidore Kuessan	Togo
Salissou Sani Isaak	Niger
Innocent Raphael Ibrahim	Niger
Yvan N'Gadi	Côte d'Ivoire
Franck Atse	Côte d'Ivoire
Armand Tokou	Côte d'Ivoire
Stéphane Tia	Côte d'Ivoire
Edouard Keita	Mali
Ibrahima Fall	Senegal
Viviane Akissi	Côte d'Ivoire
Aoussi Yandi	Togo
Cécé Jonas Haba	Guinee
Samuel Kone	Côte d'Ivoire
Amélie Ivette Kouwadan	Togo
Sorofing Traore	Mali
Fatou Bintou Massaly	Senegal
Abou Maimouna Diallo	Guinee
Dieynaba M'Diom	Mauritanie
Ibrahima Ousmane Kane	Mauritanie
Komé Fatouma Nina	Burkina Faso
Tarnagda Génèviève Clémentine	Burkina Faso
Hélène Hlungo	Benin
Jean Benjamin Bado	Burkina Faso
Koly Guilavogui	Guinee
Euphrasie Coulibaly	Côte d'Ivoire
Diallo Dialikatou	Senegal
Eleonore Kouakou	Côte d'Ivoire



## The Reproductive Health Supplies Coalition

The Coalition is a global partnership of public, private, and non-governmental organizations dedicated to ensuring that everyone in low- and middle-income countries can access and use affordable, high-quality supplies for their better reproductive health. It brings together agencies and groups with critical roles in providing contraceptives and other reproductive health supplies. These include multilateral and bilateral organizations, private foundations, governments, civil society, and private sector representatives.