

# ROAD MAP 2020

## 2020 TARGETS



### Target 1

Consolidate recent and hard-won gains in the reduction of HIV prevalence in ESA, and push towards eliminating all new HIV infections among adolescents and young people aged 10-24.



### Target 2

Increase to 95% the number of adolescents and young people aged 10-24 who demonstrate comprehensive HIV prevention knowledge levels.



### Target 3

Reduce early and unintended pregnancies among young people by 75%.



### Target 4

Eliminate gender-based violence.



### Target 5

Eliminate child marriage.

## ENABLING ENVIRONMENT

- Strengthen government ownership and leadership of the ESA Commitment process while ensuring collaboration across sectors
- Enhance country coordination mechanisms and support the development of costed intersectoral work plans
- Increase domestic funding available for the ESA Commitment and support resource mobilization efforts
- Review legislation to eliminate barriers to young people's access to CSE and SRH services with an emphasis on legal reform and harmonization
- Improve strategic information to facilitate targeted programming for adolescents and young people
- Strengthen country reporting mechanisms to inform regional accountability framework
- Scale-up innovative strategies for working with and for young people
- Address underlying structural issues such as poverty among vulnerable adolescents and young people such as adolescents exploited into sex work, pregnant and parenting teens, and adolescents living with HIV

## EVIDENCE

In 2015, a total of 351,300 new infections among young people aged 15-24.

Adolescent girls constituted 72% of new HIV infections among adolescents aged 15-19.

AIDS is the leading cause of death for adolescent girls in the region.

Only 10% of young men and 15% of young women are aware of their HIV status.

Knowledge levels remain low in the region: 45% for males and 42% for females aged 15 – 24 years.

Lower HIV knowledge levels are consistent with higher rates of HIV infection among adolescent girls and young women.

With inadequate knowledge, young people are ill-equipped to make healthy and safe decisions in regard to their sexual health.

Knowledge needs to be combined with the right skills and attitudes, which can be taught and developed through good quality, age-appropriate comprehensive sexuality education (CSE).

Developing countries account for 95% of births to adolescent mothers.

Each additional year of girl's education has been found to increase contraceptive uptake and also reduce pregnancy by 10%.

Early and unintended pregnancy often leads adolescents to drop out of school and in some contexts girls are deliberately expelled.

Adolescent mothers risk falling behind with schoolwork due to the double responsibility.

More than 1 in 3 students between the ages of 13 and 15 worldwide experience bullying on a regular basis.

Students who experience bullying, a form of SRGBV, score lower in math and reading than those who do not.

In Southern African countries, where one in every three girls has been forced to have sex by the age of 18 years.

Child marriage is rooted in gender inequality and in the low value accorded to girls.

It denies girls their rights, choice and participation thus hampering progress towards a more equal, healthy and prosperous world.

Girls with higher levels of schooling are less likely to marry as children with around 60% of girls with no education are married by 18, compared to 10% of girls with secondary schooling and less than 1% of girls with higher education in some countries in the ESA region.

Despite the presence of age of consent laws, rates of child marriage remain high due to conflicting laws or general non compliance.

## PRIORITY ACTIONS

Scale up provision and increase no. of health facilities providing adolescent and youth friendly health services.

Institutionalize AYFHS content and guidelines in pre- and in-service health provider training programmes to enhance capacity of service providers to deliver AYFHS.

Ensure age and sex disaggregation of health management information system and monitor no. of young people utilizing AYFHS services.

Intensify efforts to eliminate the extremely high levels of sexual abuse and violence against female children, including underage, child and forced marriages.

Engage young people's networks, civil society and communities to accelerate HIV prevention efforts to ensure the region's achievement of the target to end AIDS by 2030.

Scale-up and accelerate delivery of quality CSE in primary, secondary, and tertiary.

Institutionalize CSE in pre- and in-service teacher training to enhance the capacity of teachers to deliver quality CSE in schools.

Promote uptake of services by strengthening linkages between schools and health facilities.

Develop specific policy provisions and programmes for out of school and other marginalized youth, using creative and innovative behaviour change communication approaches in partnership with young people.

Engage key gatekeepers at the state and community level, in order to garner their support in the creation of an enabling environment for the provision of CSE.

Provide good quality education for all learners and ensure that girls complete secondary school.

Provide CSE that develops learners' knowledge and skills to prevent pregnancy through integrating content on pregnancy prevention, access to contraceptives, gender equality and power dynamics within relationships.

Develop and implement re-entry policies for pregnant and parenting girls and put in place programs that reduce drop out of adolescent mothers.

Increase adolescent access to health education & services (incl. contraception) through establishment of referral system btw schools & health facilities.

Eliminate school related gender based violence and engage boys and young men in learning and practicing pregnancy prevention.

Mobilize communities to promote egalitarian gender norms, engage men and boys, and end gender-based, sexual, and intimate partner violence.

Prevent and respond to gender-based violence in and around schools, in partnership with other sectors and with schools and communities.

Strengthen reliable data, evidence and knowledge about what works to end school-related gender-based violence.

Prioritize and expand financing to support programs addressing GBV, especially among marginalized and under-served populations.

Invest in programs that improve educational and economic opportunities for girls at risk of child marriage.

Engage families communities and young people to change attitudes and behaviors related to child marriage.

Ensure that services provided across the education, health, youth and economic sectors reinforce each other and are tailored towards the needs of adolescents girls and young woman at risks of child marriage.

Enforce a robust legal and policy framework for preventing child marriage and supporting married girls.

Adopt and implement model child marriage eradication laws such as the SADC Model Law on Child Marriage in all ESA countries.



# ROAD MAP 2020

**OUR VISION:**

A young African, a global citizen who is empowered, educated, healthy, resilient and socially responsible - an autonomous decision-maker and has the capacity to reach their full potential and contribute to the development of their community, country and the region



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