

Preventing unwanted teenage pregnancies in DRC, Central African Republic, Cameroon and Benin



BUILDING FLOURISHING COMMUNITIES

Cordaid's programme JeuneS3 ('santé, sexualité et sécurité' in french) works towards preventing unwanted teenage pregnancies in four francophone countries in Africa: DR Congo, Central-African Republic, Cameroon and Benin. It comprises four complementary strategies: comprehensive sexuality education (CSE) with a focus on adolescents aged 10-14 years, provision of youth-friendly health services, strengthening the youth voice and building an enabling environment (media, parents, religious leaders, authorities).

Context-specific and appropriate education materials for young adolescents aged 10-14 years

One of the program's major result is the introduction and widespread application of new context-specific and appropriate education materials entitled "Like Sarah, Miriam and Joe" for young adolescents aged 10-14 years, health workers, teachers, parents, religious leaders. An initial pilot with 2,000 booklets has proven very effective. Due to high demand, it was translated into in six additional different African language editions, and in 2018, Cordaid disseminated an additional 20,000 CSE booklets.

Cordaid trained more than 30 religious leaders in Burundi, DR Congo, Cameroon, CAR and Benin who in turn sensitized more than 800 other religious leaders. Youth champions are engaged raising awareness on CSE. For example, in Central African Republic 30 youth leaders have organized holiday camps with a mixture of fun and CSE, reaching thousands of youth at a time. Youth animators also prepare monthly radio programmes using both Catholic and secular community radio stations.



Pastor Emmanuel Nyamulinduka Fungulo, Protestant Baptist Church, Health Zone of Miti Murhesa, South-Kivu, DRC, May 2016



Training religious leaders Maroua, Region Extreme-Nord, Cameroun, October 2017

Cordaid's education materials find large-spread support by religious leaders. While religious leaders trained in Nord-Kivu, DR Congo, remain faithful to Roman Catholic Church doctrines, every other week, they allow youth leaders to offer life skills education to their peers before church time. Religious leaders are also instrumental in convincing school boards to allow CSE in faith-based schools, a process which has taken two years of patient dialogue. The communities of Alibori, Northern Benin, report that the program has contributed to much more cohesion within the community: dialogues between religious leaders and youth have enable many more dialogues initiated independently by religious leaders with teachers and parents on CSE and youth needs in general. Youth organisations and community leaders from neighbouring districts have requested to extend capacity building to them as well.

In Eastern DR Congo, 38,000 youth aged 10-24 years have accessed FP consultations in youth-friendly health facilities, during 2017 and the first half of 2018, and 5,700 in the Central African Republic. Over 62,000 short-acting contraceptives (condoms, female condoms, pills) were provided to youth, while 11,000 LARCs (injectables, implants, IUDs) were provided during the same time period in the clinics with health staff trained by JeuneS3. The results in terms of family planning acceptors aged 10 -24 years were relatively small in 2017 during the project start-up phase, but they are increasing rapidly since January 2018 as health workers have been trained in youth-friendly service provision and regular supplies of contraceptives are in place.



Awareness raising campaign on SRH & HIV in Bogo, Region Extreme-Nord, Cameroun, 2017. Muslim leader introduces the campaign to the people.

Cordaid is an international NGO with a global office based in The Netherlands, and driven by catholic social values. Cordaid is a member of Caritas Internationalis. Cordaid is a founding member of Faith to Action Network and serves on its Steering Council. Cordaid believes that people are themselves responsible to take decisions on their sexual and reproductive health. These decisions should be based on full and objective information concerning family planning and HIV prevention options provided by trained and non-judgemental health workers.

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