

YOUTH CONFERENCE ON SEXUAL AND REPRODUCTIVE HEALTH (SARSYC)

CONFERENCE REPORT



Conference Special Delegates and Partners

- Conference Conveners SAYWHAT
- Conference Hosts University of Johannesburg

Track Holders

- Students and Youth Working on reproductive Health Action Team (SAYWHAT)
- University Of Johannesburg
- (HEAIDS) & Dialogue for Change
- IBIS
- University of Witwatersrand
- **♦ Young People's Network on Sexual and Reproductive Health-Zimbabwe**



Jephiter Tsamwi Conference Chief Rapporteur



Tyson Mudarikiri Conference Chair



Mawethu Zita Conference Chair

Conference Partners

















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Acronyms

AIDS: Acquired Immuno-Deficiency Syndrome

GBV: Gender Based Violence

HIV: Human Immuno-deficiency Virus

IEC: Information, Education and Communication

LGBTIQ: Lesbian, Gay, Bisexual, Transgender, Intersex and Queer

NGO: Non Governmental Organisation
SDGs: Sustainable Development Goals
SRH: Sexual and Reproductive Health

SRHR: Sexual and Reproductive Health Rights

ASRHR: Adolescent Sexual and Reproductive Health Rights

MoHCC: Ministry of Health and Child Care MDGs: Millennium Development Goals

SARSYC: Southern African Regional Students and Youth Conference on Sexual and Reproductive

Health

SADC: Southern Africa Development Community

Acknowledgements

SAYWHAT would like to express its sincere gratitude to the various individuals, organisations and entities for the support they rendered to this conference. Hosting a conference of this nature can only be achieved through commitment, dedication, passion and determination. We will forever be grateful to all those who sacrificed their time, energy and resources to make SARSYC 2017 a resounding success. We say thank you to University of Johannesburg management and staff, for hosting this conference.

The conference convener, Mr. Jimmy Wilford, and the SARSYC Secretariat, you did a great job. Special mention goes to the two main coordinators within the SARSYC secretariat, Spiwe Dongo and Grace Mashingaidze. You worked tirelessly to coordinate the conference and ensure that delegates from 8 Southern African Countries grace the conference.

We further appreciate the volunteers who did all the running around, ensuring that adequate preparations were done and all conference proceedings were smoothly done. Special thanks to the rapporteuring team, headed by Jephiter Tsamwi, and the entire crew of note takers who successfully captured and documented all the conference proceedings.

We would like to say thank you to all delegates who graced SARSYC 2017. Without you there could have never been a conference. Thank you to the young people from the region who sacrificed their time to come and share lessons with other young people from Southern Africa. Such commitment is highly appreciated. We express our utmost gratitude to all the presenters, the track holders and the researchers for coming forward to share their knowledge and share their experiences to all the conference delegates. We say thank you.

Special mention goes to the conference partners who offered the financial support which made the conference possible. Without adequate funding, the conference could have never taken place. UNESCO, Ford Foundation, HIVOS and University of Johannesburg, your generous support brought young people together and enabled Southern African Young People to have one voice on sexual and reproductive health. We say thank you so much!



Executive Summary

In 2014, Young people of Southern Africa came up with a strategic idea to have a platform where stakeholders meet to collectively discuss the sexual and reproductive health challenges that young people face. The platform came about not only after realising the similarities of the challenges Southern Africa face but as a practical measure to step up combined efforts to tackle the increasing challenges of young people. The platform became known as the Southern African Regional Students and Youth Conference on SRH (SARSYC).

The first edition of this conference was held in August 2015 in Harare under the theme "Youth SRHR and the Post-2015 Agenda: A Time to invest in young people to harness the demographic dividend in Southern Africa." Among the key resolutions made at the conference was to hold similar conference biennually to continue to foster regional learning and sharing of best and promising practices among young people and different actors in response to the challenges of young people.

This second edition of the conference was held at University of Johannesburg in South Africa, from the 13th to the 15th of July 2017 under the theme "Building a Business Case for a Solid Future through Access to Youth Sexual Rights, Health Services, and Commodities." The theme captures the necessity of taking steps and advocate for measures in SHR response that can mitigate the possibilities of the anticipated demographic dividend from becoming a demographic disaster, mostly through lack of focus and investment in students' education and SRH rights.

A total of 8 countries from Southern Africa participated at the conference with over 300 delegates drawn from Zimbabwe, Botswana, Lesotho, Malawi, Namibia, South Africa, Swaziland and Zambia, United Kingdom, Netherlands and Canada.

The conference was structured in a way that ensured that pertinent issues were allocated time and space for specialized focus through hosting of tracks. 5 main tracks were hosted during the conference and these are: Stigma And Discrimination: University of Johannesburg; Sex And Sexuality- Shining The Light On Marginalized Groups LGBTI+, Women, People With Disabilities (PWHIV) And People With HIV (PWHIV): (HEAIDS) & Dialogue of 3:"Sex And The College" - Sexual And Reproductive Health And Rights Programing In Tertiary Institutions: (IBIS) Change; Social Determinants Of Sexual Reproductive Health (SRH): Keep it 100% campaign and Rise (Soul City); and Abortion And The Pro-Choice And Pro-Life Debate In The African Context: The University of Witwatersrand.

There were also other critical sessions that were held to iron out other issues, particularly emerging issues in relation to young people's sexual and reproductive health. These included

- The politics of sex, pleasure and condomising, Sexual Orientation and gender Identity
- SRH Education in conservative environments overcoming stigma and bias in educational contexts & Education strategies for LGBTQ SHRR
- Creating sustainable spaces for meaningful participation and engagement on SRHR and gender issues-the YPLA and YPISA models
- Sexual Reproductive Health & Rights (SRHR) Edutainment.
- SAYWHAT Southern African Regional Web for Life and Brotherhood & SAYWHAT Southern African Young Men's Forum.



The conference further had other activities like the debate session which allowed delegates to engage in those contended issues with the following topics among the debate sessions conducted

- Round 1: HIV and Young People in Southern Africa.... A case of immorality
- Round 2: Comprehensive Sexuality Education will do more harm than good
- Round 3: LGBTQ+ is a Western agenda for Africa

The key outcome of the conference was the Communique, a document that was developed by young people, highlighting their key concerns, their commitments and their advocacy message to the policy makers, governments, donor commitments and other relevant stakeholders.

Below is a summary of the key advocacy messages by young people from SARSYC 2017

- Continue supporting programs that promote young people's access to sexual and reproductive health services.
- Promote collaborations between research organisations (including institutions of higher learning) and CSO in knowledge and evidence generation that can inform SRH response for young people
- Foster private-public partnerships in addressing the SRHR challenges of young people, particularly in resource mobilisation.
- Promote youth participation at all levels of influence, including increasing youth political involvement to ensure young people's issues are well represented in spaces where policies are made
- Strengthen interventions and funding towards promoting comprehensive sexuality education
 Invest in knowledge generation through promoting research which covers diverse SRH issues
 (including biomedical researches) and promote use of the researches to inform responses
- Support youth led digital and other creative programs that are youth centered, youth focused and relevant to the 21st century youth generation
- Support programs that promote inclusion of young people with disabilities and the LGBTI community
- Support for integrated programs that enhance the socio-economic status of young people, including education and youth entrepreneurship and mentorship.
- Support programs that enhance collaborations, working together and collective efforts among the diverse CSOs and young people groups and movements at local and regional level.
- Support programs that tackle emerging issues affecting young people, including young people selling sex, sexual harassment, forced sex work, cyber-bullying, drug and substance abuse among others



1) Introduction and Background to SARSYC

Young people in Southern Africa are the most affected by sexual and reproductive health challenges. The HIV burden is very high among young people between the ages of 15-24. Ironically, this is the same age group that needs more investment in for the region to realize the much anticipated demographic dividend.

In the hyper-endemic countries like Botswana, Lesotho and Swaziland, more than 1 in 10 young people are infected. The risk of becoming infected is disproportionately higher for girls and young women. The regional HIV prevalence among young women aged 15 to 24 years is 4.8 percent, which is two and a half times higher than among men of the same age. In Swaziland, for example, 15.6 percent of young women are HIV-positive, compared to 6.5 percent of young men with almost similar trends existing in countries like Zimbabwe.

One of the most striking features of these challenges is their similarity from one country to another in Southern African Region. These similarities with regards to young people's issues across the region is what called upon the idea of bringing efforts, resources, expertise and ideas together to tackle the issues as a collective block. Inspired by that vision, the Southern African Regional Students and Youth Conference on SRH was formed

The first edition of the conference was held in August 2015 under the theme "Youth SRHR and the Post-2015 Agenda: A Time to invest in young people to harness the demographic dividend in Southern Africa.

The 2017 edition of the conference was held under the theme, "Building a Business Case for a Solid Future through Access to Youth Sexual Rights, Health Services, and Commodities". The theme follows the cue from the African Union Commission 2017 Theme for youth - "Harnessing the Demographic Dividend through Investments for Youths". SARSYC-SRH 2017 is thus strategically fashioned as a platform at which students and young people can co-create a business case to justify and argue for commitments and improved access to Sexual Reproductive Health & Rights (SRHR) services and commodities for the young people of Southern Africa. Such a broad vision shall be anchored upon student based researches and other bodies of knowledge which can help in building a business case for students to be realized as a priority target group.

The overarching goal of SARSYC is to engineer a regional reflection, sharing, and planning platform based on students in Southern Africa's encounters with SRH policy and programming practices in their countries. From these country experiences, SARSYC 2 aimed to take steps and advocate for measures in SRH that can mitigate the possibilities of the anticipated demographic dividend from becoming a demographic disaster through lack of focus and investment in students education and SRH rights.

To that end, the convening of students, academics and other stakeholders critical to the education conversation in Southern Africa through SARSYC2 created a platform for the collaborative and consultative development of a business case for significant investment materially and non-materially into young people's SRH

This report gives a summarized presentation of key deliberations and proceedings during the second edition of SARSYC



2.0 CONFERENCE PROCEEDINGS: Opening Ceremony 2.1) Conference Chairperson's Opening Remarks

The conference started with one of the conference Chairpersons, Mr. Mawethu Zita welcoming the delegates to the conference. He noted that the conference was for young people and encouraged delegates to embrace the spirit of being young, being active in their participation and discuss all pertinent issues affecting young people in matters related to their sexual and reproductive health. He further noted that during the 3 conference days there should be a change to the discourse of young people's SRH in Southern Africa. He further thanked all delegates for coming to the conference, noting that together we can address young people's sexual and reproductive health concerns.

2.2) Welcome Remarks Prof Kinta Burger

The University of Johannesburg Registrar welcomed the delegates to the conference noting that this conference was for students and young people. She highlighted that the conference is a platform to create partnerships, to build relationships and networks across the region. She further noted that this conference is for the youth to take leadership and for stakeholders present to listen to them, hear their issues and come up with programs that address young people's issues. Of importance was her key message that as Southern Africa, there is need to address young people's issues as a collective block, ensuring that all stakeholders contribute by giving insights to programs and practices. She concluded by wishing all delegates the best at the conference and wished them a pleasant stay at the campus.

2.3) About SARSYC Mr. Jimmy Wilford- Conference Convener

Mr. Jimmy Wilford gave a summary of what Southern African Regional Students and Youth Conference on SRH (SARSYC) is all about. He highlighted that the initiative, started in 2015 in Zimbabwe, is a platform for the region to collectively address young people's issues and come up with one voice on young people's SRH issues. He noted with concern that for the young people in the region, discussion and education on sexual and reproductive health is not common, a factor which contributes to the numerous challenges young people face. He cited an example that even pregnant young women will still deny that they are sexually active, indicating how difficult it is for young people in the region to open up and dialogue on SRH issues. He noted that SARSYC embraces all those realties for the purposes of coming up with solutions.

Mr. Wilford also touched on logistical issues of the conference highlighting that we still need to improve on a number of issues, especially the levels of communication when planning the conference. He highlighted that all parties need to work together and ensure that in 2019, we have a much improved 3rd edition of the conference.

2.4) Opening Conference: Setting the Tone

2.4.1) supporting the youth on Sexual Reproductive Health & Rights (SRHR) issues Eka Williams (Ford Foundation)

Eka Williams highlighted that a healthy, educated, skilled, empowered and youth driven population is what is needed to turn the continent around. She further noted that the Ford Foundation Office has been associated with the Southern African Regional Students and Youth Conference on Sexual and Reproductive Health since its inception, and they are pleased to be part of this second edition held at the University of Johannesburg and further acknowledged that the efforts of SAYWHAT and other partners in making SARSYC a reality.



Dr Williams highlighted that the issues for students in southern Africa are very similar, despite different contexts in countries, highlighting that through their work with students, universities and colleges in a number of countries in the region, FORD Foundation has been able to document similar challenges and gaps in terms of the response to SRHR and HIV. She indicated that one of the things they tried to change through these programs over the last decade has been to ensure that students play a more proactive role in education and campaigns on sexuality, gender issues, reproductive health and rights, HIV, and in educating each other and ensuring that policies and services are in place and used by students.

In line with the above, Dr Williams highlighted that this conference brings with it some opportunities that can be meaningfully taken to improve the young people's SRH terrain. She concluded by highlighting some of the key issues she would wish could be addressed to reap the best benefits out of the youth population. These are:

- Higher Educational Institutions need to invest in the health of young people
- Creating the environment to ensure that students fully participate in decisions that impact their health;
- Ensuring policies are in place to deal with issues such as sexual harassment, disability, SGBV and homophobia
- Working with governments and other stakeholders to sustain program implementation to increase awareness, education, and adequate services around SRHR and HIV.
- Young people should take leadership and responsibility for their health through meaningful participation in decision making around their SRHR.
- Defining the nature of the partnership between school authorities/leaderships and youth led groups advocating for SRHR. There is need to learn from what works in developing a productive partnership that will respond to the needs of all students.

2.4.2) Professor Mzikazi Nduna 'It is unAfrican', it is 'Western', it is 'learnt' it is 'fashion' it is a 'lifestyle'

In her presentation, the Professor raised critical questions regarding Africanity and its position on sexual and reproductive health matters. She noted that whilst research findings suggest progressive shifts, there remain elements of -ism which are deployed under the guise of the African identity. Racism is used to justify denial of rights. Africanism is misused to resist knowledge and scientific evidence and to perpetuate ideological prejudice against things labeled as unAfrican. Heterosexism is used to reject other forms of sexual practices and preferences such as homosexuality. Sexism pushes women's needs and rights to the margins.

She further highlighted race issues in relation to Sexual and reproductive health by stating that white people talk to their children about SRH. As a result of the culture of silence surrounding sexuality in African societies, more black girls falling pregnant at a tender age. She also noted that these stereotypes are, to a large extent, hypothetical and not based on research evidence. However, society tends to attribute ignorance to being Black or African rather than lack of access to Information Education and Communication about SRHR. She concluded by noting that research could play an important role in addressing these stereotypes within the 'decolonial' framework and that there is a need for the higher education sector to engage more social science and humanities research on sexual and reproductive health and rights.



2.4.3) Pitching the Students voice on Sexual Reproductive Health & Rights (SRHR) Cleopatra Makura: National Coordinating Committee Chairperson, SAYWHAT Zimbabwe

The young female student highlighted that young people constitute more than 60% of most Southern African Countries, however despite this population's dominance, young people are not active participants of policies and programs on Sexual and Reproductive Health. Consequently, they experience a number of challenges which include but are not limited to sexual harassment, unintended pregnancies, unsafe abortions, high HIV incidence, and lack of access to health services and commodities. She further noted that creating a business case for Southern African member states to invest in their sexual and reproductive health needs will contribute to the achievement of regional and international frameworks towards positive health outcomes for young people like SDGs 3, 4 and 5, ending AIDS by 2030 and realising the demographic dividend.

Miss Chikura further highlighted that access to Sexual and reproductive health rights and commodities is a shared responsibility and therefore young people should use the conference as a platform to participate fully and proffer tailor made solutions relevant to the Southern Africa block and share effective practices. She concluded by noting that students and young people are the change makers, innovators and leaders of now and have great potential to contribute to building a business case for a solid future.

2.4.4) Living the Sustainable Development Goals (SDGs) in Southern Region Lebogang Mawelela

Lebohang highlighted a number of issues and questions that needs to be looked at if Southern Africa is to realize the fruits pf the SDGs. She gave a challenge to delegates highlighting the following questions

- Community Engagement: Are we change agents in our various spaces
- Policies: Are we participating in policy development
- Are we not spending more time online, doing campaigns online without actual community involvement

She further noted that through inclusive implementation of the SGDs, Southern Africa has an opportunity to address poverty issues, especially among young people in the region noting that the region has plenty resources and they should be used to make the situation better. She concluded that for the SDGs to be realized, passion and hardwork are needed more than money.

3.0) Key Note Address: Building a business case a solid future: Access to Youth Sexual Rights and Health services and commodities

Judge Edwin Cameron

The judge gave a detailed account of the issues, noting personal experience and shared lessons from an informed perspective of someone who has experienced challenges with regards to his own sexual and reproductive health. His key message was that Southern Africa needs to invest in prevention, noting that by closing the tap on new infection, Africa can achieve a lot of its desired outcomes for young people

He further highlighted that women are the most affected with the HIV burden and populations like the LGBTI community face a number of challenges owing mostly to the discrimination they face in the societies. He shared his personal experience as a gay man who has lived with HIV for thirty years. In relation to that, he urged young people to adopt protective behaviours to about being infected.



Judge Cameron noted that despite these challenges, HIV can be treated with Anti-Retroviral Therapy (ART). He encouraged delegates to continue to advocate for treatment to be made available for everyone and that governments scale up prevention programs as well. He emphasised that it is our collective duty to ensure that any form of suffering which is HIV/AIDS related must come to an end.

4) Breakaway Sessions

Participants were split into 5 separate tracks that tackled different SRH issues affecting young people

4.1) Track 1: Stigma and Discrimination:

This track looked at Stigma and Discrimination as one of the key social challenge that young people face, especially young people living with HIV and the LGBTI community. The track examined and explored how Stigma is hampering the achievement of other priority goals across the region including the 90-90-90 goals. Through the deliberations, it was highlighted that if HIV is still highly stigmatized, most young people will fear getting tested and those who test HIV positive, cannot freely take their medication.

The track further looked at stigma around the LGBTI community where it was highlighted that Stigma and Discrimination is the major barrier to the community's enjoyment of their sexual and reproductive health and rights. Access to sexual and reproductive health services remains a challenge, as both the society and the service providers themselves highly discriminate against the LGBTI community. It was highlighted that in the spirit of Leaving No one Behind which promotes inclusivity, focus should also be on the often forgotten communities so as to ensure that they access services.

The following were the major recommendations made in this track

- Facilitate sensitization and capacity building of service providers in dealing with the disadvantaged communities
- Ensure that community wide awareness programs are done to de-stigmatise HIV in societies
- Embrace the use of digital technologies in coming up with approaches to raise awareness to the public on LGBTI issues
- Ensure that young people living with HIV are supported with counseling especially around relationships
- Strengthen advocacy towards creating an enabling an environment for stigmatized communities to access sexual and reproductive health services, including in public health facilities

4.2) Track 2: Sex And Sexuality- Shining The Light On Marginalized Groups LGBTI+, Women, People With Disabilities (PWHIV) And People Living With HIV (PWHIV) HEAIDS

Summary of Track

People with disabilities (PWD), women and the lesbian, gay, bisexual, transgender and intersex (LGBTI+) community are usually the most affected and least catered for by SRH services due to the specificity of their needs. This track facilitated conversations that illuminate and attempt to address the numerous challenges which inhibit these vulnerable groups from accessing SRH services. The track was to explore and share experiences based on living no one behind through inclusive program design that incorporates vulnerable and marginalised communities.



Track Proceedings

The track allowed for the sharing of experiences among the delegates on some of the programs that they are doing to address sex and sexuality related issues among g young people. Of interest were the different programs that partners were implementing, mostly targeting young women and people with disabilities.

The second day of the track saw different researchers presenting on various researches conducted around sex and sexuality related matters. These included:

- Understanding transactional sex among young women in South Africa: a study based in Kwazu lu-Natal, Eastern Cape and Mpumalanga provinces.
- UJ undergraduate student's perceptions on why women with higher occupational status experience physical abuse in marriages.
- Exploring the relationship between unemployment and the reporting behaviors of women experiencing intimate partner violence, case study of Bothaville in the free state province of South Africa

This track also touched on the violence faced by women in the societies. Through the researches that were presented, it was noted that intimate partner violence is among the key challenges. Although it is less reported, it causes a lot of women, particularly young women to be continuously trapped in abusive relationships

Of concern was the reality that society upholds value systems that result in women surrendering control over their bodies. Informed by these realities and other issues discussed in the track, some of the key recommendations that were made include:

- Father Absence: Explore more through research on the impact of father absence to the modern day generation of youth. New evidence is indicating that father absence is exposing young people of today to a number of socio-economic related challenges
- Traditional Cultures-Lobola: It was recommended that while there are cultures like Lobola that are deeply rooted in the societal systems, communities must begin to talk about the other side of those cultures, especially in how they perpetuate women subordination and abuse by the male counterparts. Programs to engage communities on these issues were recommended.
- Bottom up Approach: It was recommended that a bottom up approach must be used in addressing these challenges. At family level, parents should be engaged on gender issues, while at the school and the media, gender stereotypes must be addressed and promote a culture of equality and respect of rights of women
- Male Involvement: The track recommended that for programs to be effective, both men and women have a role to play. One of the major gender related challenges in the society is that most men regard gender issues as women's issues, yet gender affects all societies; and men are either the perpetrators of the violence and in some instance they are also victims of GBV. Both men and women must come together to address gender issues.

4.3) Track 3: "Sex And The College" - Sexual And Reproductive Health And Rights Programing In Tertiary Institutions:

Track Summary

Over the years, commendable initiatives have been undertaken by tertiary institutions, governments and civil society organisations to address the sexual reproductive health and rights challenges that confront students in tertiary institutions. While these efforts have significantly contributed towards raising awareness of the magnitude of challenges that students face, the majority of these efforts have failed to transfer the requisite knowledge and skills to enable students to take the lead in addressing their own challenges.



The track served to promote student leadership and participation in problem identification, and designing relevant interventions to address the identified opportunities and challenges, so as to bring sustainable results. Student empowerment lies at the center of such initiatives and makes them partners, and not beneficiaries, in interventions meant to benefit them

Track Proceedings

The track was characterized by the presentation of research which brought in new evidence, mostly around perceptions and attitudes of students and young people in key SRH topics pertinent in their daily lives. Among the researches that were presented.

- University of Johannesburg (UJ) sociology undergraduate student's perceptions on the phenomenon of transactional sex within student communities. (M. Machaba)
- UJ students' perceptions and awareness around safe sex empowerment, i.e.: IOHA related services / programmes, fe/male condoms, masturbation and other safe sex pleasure activities. (Z.Ramatseba; N. Gasa)
- Attitudinal, mindset and behavioral change for university students: promoting the increase of testing and prevention (S. Suknunan, N. Magantolo, A. Ramballie, E. Langley and T. Khumalo) South Africa is trying to push hard on condom use because of the high prevalence rate in the country. To make this possible, a study was done to investigate the views of the students on the use of contraceptives. Structural and personal issues were considered in the study in order to understand sexual behavior of students. Among the key issues noted were:
- Interpersonal relationships influence how young people view and choose contraceptives. Positive people around a person will influence the person positively about contraceptives and vice versa.
- Students find it difficult to discuss contraceptive issues with their parents and end up turning to friends for advice on contraceptive choices.
- The internet space is universally used by students as a platform to consult on contraception and other SRH issues

The track further looked into the health implications of transactional sex as it is prevalent in universities. A key phenomenon that was discussed was the issue of blessers. Young girls transact sex for goodies from the blessers. Blessers are usually older men, who are wealthy, and solicit sex from university students in exchange for small goodies like fast foods.

One of the key recommendation that came out of this discussion was that there is need to not only to engage the student community but to involve the entire society (Including the men in the society who are categorized as Blessers)

4.4) Social Determinants of Sexual Reproductive Health (SRH):

Track 4 looked at the factors that influence behaviour change amongst students, so as to understand how the HIV virus is spread amongst young people. Effective preventive strategies, the avoidance of risky behaviour, life skills and a supportive environment were noted have beneficial effects. Southern Africa has a generalised HIV epidemic driven largely by sexual transmission. Social, biological and structural drivers are the key determinants to the spread of HIV epidemic. A multi-prolonged approach which includes biomedical, behavioural, social and structural factors are needed to reduce new HIV, STI and TB infections (SA NSP 2012-2016).

Track Proceedings

The track explored the concept of social justice, mainly for women and girls between 15- 24 years because they were the most vulnerable due to a number challenges.



These were summarized as:

- Poverty
- Lack of education
- Peer pressure
- Culture
- Lack of information
- Need for money
- Unemployment
- Technology

As a result of the above women and girls are more vulnerable to new HIV infections than men and boys in the same age group because they end up in

- Abusive relationships
- Intergenerational relationships
- Transactional sexual relationships
- Violent sexual relationships
- Activities which put them at risk such as sex work

However during question and answer time participants also raised these points as suggestions to empower women and girls

- That women and girls need to be educated about the dynamics of culture so that they are not affected by negative cultural practices
- Men also need to be educated about how to treat women from a tender age as part of socialization so that they do not abuse women
- Some cultural practices need to be discarded to go with modern trends

Through a research presentation, the track discussed the various approaches of communication between parents and their children regarding sexual reproductive health issues. It examined how parents speak to their children about sex and sexuality. Its findings were that nowadays parents speak to their children in a variety of forms through showing them images on the internet and through casual conversations. It also noted that some parents do not speak to their children about sex while others say that engaging in sexual intercourse can lead to pregnancy thereby communicating an incomplete message. The findings also noted that many teens do not want their parents to find out that they are sexually active as they fear reproach.

The study highlighted that if teenagers ask questions about sex then parents will misinterpret the questions as evidence their children are engaging in sexual activity. Children therefore source their own information and depend on their peers to discuss the information they have sourced as they try to understand it. In its recommendations the research urges parents to always create a foundation for communication between their teenagers and themselves, and encourages them to talk honestly as taking about sex does not necessarily encourage sex.

The next research was presented by a student from the University of Namibia and focused on the alcohol use and risky behaviors among the youth at the University of Namibia main campus. Her findings were that:

- 48% of students in Namibia reported to be male who consume alcohol
- 50% of female students don't even remember after being under the influence of alcohol if they used protection of not and
- 26% of male students say they used condoms while under the influence of alcohol



The recommendations of the research were that youth should be involved in advocating change against sexual risky behavior and that as the youth we must tackle ignorance, fear and vulnerability when sexual risky behavior is involved in sexual reproductive health.

The following are the key recommendations that were discussed at the conference to address each respective challenge.

- Sexual debut Tailored prevention interventions for the youth to facilitate delay of sexual debut and sustain protective behaviours.
- Multiple sexual partners Multi-level interventions that focus on sexual, social, cultural and gender norms and values.
- Condom use Increase consistent use, especially among key populations, which include sex workers.
- Age-disparate sexual (intergenerational) relationships Target prevention strategies for men and women who have partners much younger/older than themselves, as significant age discrepancy may sometimes increase HIV exposure risk
- Alcohol and substance abuse Interventions to decrease alcohol abuse and other substance abuse (including illegal substances) as substance abuse negatively affects SRH.
- Prevention knowledge and risk perception Prevention strategies for people who expose themselves to the risk of HIV infection, through information sharing

4.5) Track 5: Abortion and the Pro-Choice and Pro-Life Debate in the African Context

This track provoked a discussion on abortion which is a subject rarely talked about in the discourse of young people's sexual and reproductive health. During the session delegates discussed the issues from an informed point of view by exploring the evidence from researches, and discussing lessons and recommendations to address the issues identified.

As the discussions ensued, the following key questions were asked

- How do we address abortions as a critical SRH issue affecting young people without it being looked at as a moral question
- How do we scale up access to contraception by young people as the first strategy to address unintended pregnancies among young women
- How do we engage young men in abortions and contraceptive matters
- How do we de-politicise abortion, and look at it as a mere women's issue that needs to be addressed
- As evidence that criminalizing abortion will not necessarily reduce abortion cases is arising, how
 do we begin to engage policy makers on the issues

While it remains a highly contested issue, delegates were able to appreciate that abortion is a serious issue faced by today's generation of young people, with many young women losing their lives in the process of accessing abortion services from unqualified personnel

One of the critical recommendations from the track was that even in those countries where abortion is not legalized, young women who qualify to have the abortion within the confines of the legislative frameworks available should be able to access the service. It was noted that due to the bureaucracy surrounding legal access to abortion services, young women such as rape victims, often fail to access it because of the barriers that they when acquiring the relevant documents.



5) Debate Session

The debate session was held to create a platform for young people to critically analyse the key issues affecting them, thereby encouraging open dialogue and examining all factors and times conflicting arguments around the issues.

Round 1 of the debate session looked at the argument that HIV and Young People in Southern Africa is a Case of Immorality.

Among the major points brought forward were:

- There are young people who are horizontally infected-through mother to child transmission
- There are other young people who are rape victims, and may get infected in the process
- Gender and cultural norms that make particularly young women vulnerable
- Lack of parental guidance and mentorship is also rendering young people vulnerable

However, there is also need to look at

- Young people's irresponsible sexual behaviours, including Multiple concurrent partnerships
- Abstinence is no longer valued
- Condoms are given for free but young people still engage in unprotected sex
- Even young people from well off families, may still engage in transactional sex, meaning that
 poverty is not the only factor as the level of responsible on the part of young people plays an
 important part

Round 2 of the debate session looked at the topic LGBTIQ in Africa is a Western Agenda In this debate, there was generally agreement that LGBTIQ community has historically been a part of African societies. However, both the panelist and the audience questioned why the LGBTIQ is now being made a condition for African governments to receive foreign aid and why are African's voice to focus on more pressing developmental issues relevant to their contexts are being ignored with LGBTIQ receiving more backing from Western Countries than other identified priorities.

Round 3, which featured the winning teams from the first and second round, debated on the topic Comprehensive Sexuality Education will Do More Harm than Good to Young People During the debate, it became apparent that CSE has been proven effective by research and it is a solution to most of the SRH challenges that young people face today. Overally, the following recommendations were made:

- Governments to invest more in capacity building of teachers to teach CSE
- Have community wide awareness programs for society, including parents to appreciate CSE
- Explore the role that culture can play in aiding CSE
- Always take note of age appropriateness of the content so that it will help the young people to make informed decisions and not ignite the curiosity to experiment with sex.

Day 2

Rapporteur's Feedback

In his presentation on the feedback of the deliberations which occurred during the first day of the conference, the Chief Rapporteur, Mr. Jephiter Tsamwi gave an analogy of what he termed The Questions, The Reality and The Practical Solutions, as informed by discussions that ensued.



He noted that looking into these issues will help in not only shaping the conference key resolutions but will also be the first step into creating sustainable programs that can respond to the real issues affecting the young people in Southern Africa. The following were the key issues he highlighted.

Table 1: Summary of key Issues Key Issue Summary

Partnerships Considering the similarities of the challenges young people of Southern Africa Face, there is need to work together by creating partnerships. The Levels/Opportunities can be

- 1)Students-Civic Society
- 2) Private-public partnerships
- 3) Inter-country learning and Sharing

Focus more on Prevention Quoting Judge Cameron words that "It is not a good thing to be infected with HIV" there is need to focus on closing the tap or mopping the flo0r?" As we scale up treatment, let us scale up prevention and since "ARVs work; and they work for everyone" we should make treatment more accessible for all as treatment can be part of prevention

Research and the SDGs Achieving the SDGs involves passion + resources. This should also be backed by researches, and in the process, we must redefine our researches, make use of students, do more researches and tackle critical issues like GBV. In the spirit of #LeavingNooneBehind, stakeholders must invest in finding out the critical elements that are left out and who is being left behind, including but not limited to Women and girls, People with disabilities, LGBTIQ, People leaving with HIV

Access to Services

Indeed access to SRH services ins a solution but the following questions ned to be answered.

- Is the environment conducive enough
- Are the services affordable?
- Are the programs relevant to the youth?
- The need to innovate, challenge young people to drive creative interventions
- Beyond the #hashtag! We need practical actions on the ground

Integration and Interlinkages of SRH

It is more strategic to focus on the total wellbeing of young people. "If we keep girls in school, we lower some of the challenges we face today," Challenge to governments to invest in young people Including in areas of life skills, tackling unemployment, investing in sexuality education From the cultural lenses: Role of Ubuntu Modernization/Westernization/Liberalism is a reality

There is a need to question what should we borrow from our Africanity and what we should reject from "The West" #Ubuntu. Westernization and Africanhood are enemies that need each other! We need to:

- Challenge cultural norms that infringe the enjoyment of human rights (invest in societal education)
- Take an appreciative approach to tackle social norms
- Scale up interventions that keep girls in school

The Demographic Dividend

This can be a sweet bonus but...:

- How are governments investing in this; what is the role of civic society
- Need for skills development and education
- Promote accountability for governments



- Promote youth leadership-lead with confidence
- Strive for social justice and programs that protect the minority

Comprehensive Sexuality Education

While all governments are investing the following are the critical questions:

- Is it being well understood by communities including ourselves?
- Has enough investment been done to make it work?
- 3 years into CSE, what are the results that we need to reflect on and improve?
- What is the role of culture in CSE-Africanity is a reality and cannot be easily buried?

Sessions

7.1) Session1: The politics of sex, pleasure and condomising:

This session looked at the sex from a gender perspective, exploring how gender norms shape young people's sexuality and how gender makes young women of today vulnerable to HIV infection. The session looked at some of the stereotypes, inherent in the society which puts women in positions of vulnerability. Most importantly, the session also looked at gender and religion, unpacking how religion has been used as a weapon of weakening the position of women in the society, including in sexual relationships between men and women.

From the deliberations that took place in the session, there were some critical elements which were recommended for exploration and redefinition so that the region can become an asset in addressing young people's sexual and reproductive health issues. The track also came up with some recommendations on how to dislodge some of the stereotypes and gender issues that make women vulnerable.

These include the following:

- The Bible: It was discussed that the bible does not necessarily make women vulnerable but it is the biased selection of verses and biblical chapters used by chauvinists to advance their interests at the expense of women advancement. In light of that, religion should not necessarily be viewed as an enemy to gender movement but society should invest in how to use the same book to promote equality
- Break the Silence on Sex and Sexuality: Because of the conservative nature of the society, it is very much difficult to talk about sex, yet it is the root cause of the challenges that young people face today. The session recommended that all stakeholders working with young people must come up with programs that promote free and frank discussions on SRH especially parent to child communication
- Engage religious leaders on gender and SRH issues so that even the church can be an avenue to reach out to the young people

7.2) Session 2: Sexual Orientation and gender Identity

The session was presented by Prof. Mzikazi Nduna. The overall theme on the presentation in the slide show was Binaries and Boxes (or Not) - Understand human sexuality- Understand life. The presentation placed its emphasis on sexual orientation and gender identity, explaining how these two differ. To explain this, Prof Nduna used Derene van Dyke's box of binaries. The initial starting point was on showing how Sex, Gender identity, sexual orientation and sexual practices differ even though they are always confused. Using the box of binaries, Professor Nduna tried to show how all the four terms had binaries for example gender is male or female. Binaries were explained as normalized.



These binaries made it difficult to understand the third sex for example transgender or intersex. So, the presentation outlined that creation of binaries makes people forget that life is not about binaries and that putting people into boxes makes us forget about the others.

Sex, sexual orientation, gender identity do not determine who a person likes rather it's a person's sexual orientation. Prof. Nduna went on to talk about the ownership of body parts belong to and common ways of having sex.

Issues addressed and recommendations included:

- What oral sex means and its effects to young people.
- Different people can have consent over a person's body e.g. parents in the exchange over a child's sex
- Conference is believed to be using heterosexual language
- Address multiple partners
- Address the issue that binaries are still seem to go together
- Find ways in addressing the issue of children being able to talk about sex with parents
- Address issues of parents not accepting that their children are sexually active
- Providing more information on intersex and transgender persons

7.3) Session 3: SRH Education in conservative environments - overcoming stigma and bias in educational contexts & Education strategies for LGBTQ SHRR

Under this session, researchers led a discussion on a research conducted on Developing a Best Practice Model within Higher Education: Linking behavioural, clinical and technological elements to HIV, a research by the University of Kwazulu Natal. The key background to this study is that South Africa has the leading profile for the HIV epidemic in the world. According to UNAIDS GAP report (2016), as of 2015, there were 7 million people living with HIV, with 380 000 new HIV infections, 180 000 AIDS-related deaths and only 48% of adults on Antiretroviral treatment. UNAIDS GAP Report (2016) asserts that HIV prevalence is almost 40% in the province of KwaZulu-Natal (out of the 7 million people living with HIV with the most vulnerable age group being between 15-24). Within UKZN, there are approximately 45 000 students of which most of them are between the ages of 18 and 21. This indicates an age group that is vulnerable to HIV infection and transmission

It was noted that the aggressiveness of the Pandemic requires 'innovative thinking, methods, measures and practices' and a Best Practice Model was conceptualised as a strategic response to the Epidemic from a Higher Education Perspective. This model tries to leverage innovation to practice and Align to NSP 2017-2022 (draft) and UNAIDS

In summary, the core of the model is made up of the various key constructs which are:

- Social /Behavioural
- Clinical
- Research
- Technological
- Knowledge (central dependent construct)

One of the key recommendations from this track was that we need to utilize Systems and Technology to stay ahead of the Pandemic, taking medical and behavioural Intelligence. This can be done through Investing in high scale and sophisticated systems and technologies such as:

- Datamining
- Predictive System
- Dashboards / Score-Carding
- Web 2.0 Mobile applications



7.4) Session 4:

The 21st Century Young African Leader in Action: Creating sustainable spaces for meaningful participation and engagement on SRHR and gender issues-the YPLA and YPISA models and giving the EARS for Young People

National AIDS Council-YPNSRHA and SAYWHAT

The main point of the session was to learn and understand intimate partner violence, romantic relationship and parent to child relationship. The session was more interesting as it allowed the audience to voice their opinions and experiences.

A play by graduates from SAFAIDS

Young people played a mini drama on romantic relationship, parents to child relationship and intimate partner violence. The act portrayed concepts such as love, happiness, trust, faithfulness and later on abuse.

Audience Comments

The act actually shows that, men can be happy in the first stage of relationship which is generally known as honeymoon stage. But when the honeymoon stage ends, they may start cheating. The drama also showed that, men can abuse women emotionally but women may not take action against it. They can be blinded by love or stay in such relationships for security assurance. Moreover, men take their frustration on women and leave them confused too. For example, in the play, the man complained about the food that was cooked by the wife. He shouted and used threatening words leaving even though he has been eating the same food all along. It was noted that the reason why he is doing that is because he needs a reason to engage in extramarital affairs.

Communication in relationships

There is lack of communication in most relationships either in intimate or parents to child relationships. Body language is very important in all relationships and people should not use gestures that show aggression. Another aspect of good communication is eye contact as well as listening skills. It is also important to show interest when someone is talking. People must learn to talk things out rather than to keep them in because that can create anger or grudges

Parent to child relationship

It was emphasized that emotional blackmail or flattery from a child is not necessary when wanting something from a parent. By emotional blackmail or flattery the audience meant saying things like 'mommy you know I love you and appreciate everything that you do' and then ask for what they want. One young female raised a concern about why parents fail to communicate with their children especially concerning sex talks. One young women asked why they (parents) can't accept the reality that not everyone will break their virginity after getting married.

Another participant, a mother of three children, gave a response based on her relationship with her children noting that parents do not feel comfortable talking to their children about sex. It was highlighted that parents do not share their experiences with their children so that they are able to learn from their parents past mistakes.

8) SAYWHAT Southern African Regional Web for Life & University of Johannesburg Brotherhood and Sisterhood

This session was held to bring attention to the delegates emerging issues affecting mostly young women. From the discussions that took place, the following are the key issues raised and the recommendations brought forward



Cyber-Bullying: The use of social media and its popularity among young people has brought many benefits to the socio-economic wellbeing of young people. Equally, it has brought in new challenges that mostly affect young women. It was noted in the session that cyber-bullying has become a common phenomenon, causing young women to be stripped of their dignity, mostly when their boyfriends or former boyfriends leaks out nude pictures to the media. Delegates noted that while emphasis should be on sensitizing young to exercise caution and try as much as they can to avoid sharing nude pictures with anyone, legislation must be put in place to criminalize revenge porn or sharing of one's personal files to the media without the consent of the owner.

Sexual Harassment: This was noted as a cancer that has for a long time been ignored or buried under the carpet as if it is not happening. However, the reality is that sexual harassment is rampant, especially in colleges, causing the college environment to be a space where young women cannot fully enjoy their rights at college. The conference recommended that sexual harassment policies should be formulated, effected and ensure that the entire college community is sensitized on the issue

Human Trafficking: This was noted as a new kind of abuse that is becoming rife in Southern Africa. Many young women are sold into forced sex work, mostly after being lured by friends or relatives into seeking employment. It was discussed that many young women have fallen victim to this trap, exposing them to a lot of challenges including those that put them at risk of infection.

Day 3

7)Rapporteur's Feedback 9.1) Key Additions to Programming

In his feedback, the Chief Rapporteur brought forward a list of possible elements that can be added to strengthen programing on young people's SRH in Southern Africa as informed by the discussions that took place in the second edition of the conference. These included the following Male involvement: In addressing GBV and other issues that have traditionally been regarded as

women's issues

Social media-As a tool and a vise to young people SRHR: It was recommended that social media is a tool that should be mainstreamed in programming owing to its relevance and popularity with young people. However, there is need to guard against the many challenges that are coming with this technological advancement, including cyber-bullying

Parent to child communication: Parental involvement was recommended to ensure that the home space is also one of the environments where young people can receive comprehensive sexuality education

Challenging social norms that promote risky sexual behaviours: To close the tap on new infections, programs need to address social norms that promote risky sexual behaviours among young people.

Utilisation of researches-should be beyond making presentations: While there are many researches being conducted delegates noted with concern that only a few of these researches are actually being used to transform programming on the ground. Utilisation of researches will improve programming for young people.

Mentorship programs: It was noted that mentorship programs can help young people make informed decisions, especially with regards to sexual and reproductive health matters Tackle emerging issues (e.g. cyber bullying, sexual harassment, young girls selling sex)



9)Plenary Discussion

The rapporteur led a discussion with the conference delegates on the way forward to improve the situation in Southern Africa in as far as sexual and reproductive health for young people is concerned. He requested the delegates to suggest areas that they can recommend to be their own commitments as young people to improve the situation and some of their key advocacy messages to the policy makers in the region. The following were some of the feedback from the delegates Meaningful Involvement of Young People- In policy formulation and in designing, implementation and evaluation of programs

Involvement of Young People in Marginalised Areas- Including those in mining areas Strengthen Collaborations- Between research organisations and young people, including students in Universities

Inclusion of the LGBTIQ issues

Strengthen Biomedical Researches-Including government commitment towards funding such programs

Working together as a Region- Create partnerships and create synergies in programming for young people in Southern Africa, and not engage in competition Young People to be the Change. To be the change young people want and not wait for governments to take the lead on their behalf

Religion and Traditional Leaders- To revisit the approaches and come up with programs that harness cultural values and systems to be part of the solution and not treat them as enemies to the

Vision We Want

Promote Youth Leadership- Including in political positions so that their issues are heard **Documentation-** Young people to document their own stories and be heard **Change of Mindsets-** Embrace diversity and mainstream the spirit of inclusivity so that no one is left behind

10)Panel Discussion: The 21st century outcomes, SRHR programming in Higher Education Institutions

Health hosted by Conference Chairperson 10.1) Sexual Reproductive Health & Rights (SRHR) programming in South African higher education institutions (HEIs)

This looked at some of the fundamentals often ignored, addressing the perceptions and exploring how some of the perceptions may result in the avoidable shortcomings in our programming. The presenter noted that Realising Sexual and Reproductive Health depends on fulfilling sexual and reproductive rights. He further teased questions to delegates, asking how we respect people's right to make choices about their health. We seem to be working from the premise that people are mere victims of their conditions; that they have no choice; that their sexual decisions are always determined by factors outside their control. He noted that In fact people do rationalise over these things and make decisions based on careful calculation of risks and benefits. People may choose to have unprotected sex because it suits them at that particular given time. An understanding of these may help people appreciate choices that people make in as far as SRH is concerned.



10.2 Structural and social barriers prevent lesbian, gay, bisexual, trans-gendered and inter-sexed (BELTING) students from accessing healthcare (Atholl Kleinhans)

This presentation looked at the challenges faced by students who belong to the LGBTI community. Among the statistics presented showed that 14% of Gauteng residents support violence against gay and lesbian people, Love Not Hate calls for the fight against homophobia to become a national priority. Among the results of the 2015 Gauteng City-Region Observatory Quality of Life Survey, released on Tuesday, 14% of Gautengers agreed that it's acceptable to be violent to gay and lesbian people and that represents around 1.26 million people in the province, and reflects an increase from 13% in 2013. Equally shocking, only 56% of respondents felt that gays and lesbians deserve equal rights. This is a significant and disturbing drop compared to 2013, when 71% agreed with the statement.

Because of this situation, LGBTIQ students face a number of challenges especially in accessing services because of some of the following

- A lack of adequate and dedicated education and health services for LGBTI students.
- Available services tend to be heterocentric and favours heterosexual students,
- Health care personnel holds strong heteronormative attitudes.
- Religiously motivated stigma and discrimination prevents students from accessing services.

He concluded by noting that poor health threatens the rights of LGBTI students to education, limits economic opportunities and increases the risk of poverty within LGBTI communities. It also notes that religiously-motivated stigma and discrimination towards LGBTI students continues to act as a barrier to LGBTI healthcare. Cultural norms that predominantly align with heteronormative attitudes may also serve to inculcate homophobia in various social and healthcare settings.

The structural barriers indirectly affect how LGBTI students will experience healthcare 10.3) Work, rape and drugs- A survivors' story (Griselda Grootboom)

As a survivor of trafficking, Griselda noted that human trafficking is real and there are many unwritten stories of young women who have fallen victim it. She noted that while it is not spoken of in the Southern African context, it does occur. She called for delegates to ensure that programming does not exclude issues around this phenomenon, and to increase awareness on human trafficking amongst young women.

10.4) Challenging innovation in SRH programing for students (Lucetta Chifamba)

In her succinct presentation, Lucetta called for Southern Africa to embrace new technologies to help improve young people's access to sexual and reproductive health information. She further noted that to improve programming for young people, there is need to scale up knowledge generation through research and ensure that the researches are used to inform best practices that can be adopted. She further highlighted that in light of the pursuit for the demographic dividend, there is need to ensure that programs for young people holistically address the issues they face and advocated for the inclusion of young people's economic issues, including access to education, especially by the girl child. She concluded by noting that the region need to address cultural barriers to young people's enjoyment of their SRHR, including barriers to the fulfilment of the SRHR for the LGBTI community

11) Boys Diaries (Educational Documentary) (Young People Network on Sexual Reproductive Health HIV and AIDS (YPNSRHHA

The session placed emphasis on the need for interventions that will cater for issues that are faced by young people. Such interventions need to target both men and women. Underlying argument of the session was that health initiatives have side-lined the very notion that boys have issues too. That is, there is more focus on girls than boys. It is for this reason that the Chair alluded to the fact that organisations should empower both girls and boys.



In the track, an educational documentary titled "Boys Diaries", was screened, and showed some of the challenges boys face. The documentary highlighted on the fact that boys face challenges too thereby dismissing the societal notion that boys are strong and do not experience problems. The documentary was seen as informative and called for the inclusion of boys in SRH interventions for young people.

A research on the "Gaps and challenges in male programming" was also presented. The aim of presentation was justified by the need for more programming that focused on providing information about sexual and reproductive health to young adolescent boys and young men. When it came to issues of sexual and reproductive health girls would be facilitators in the process of policy making but it was not the same with boys. The presentation shows that there is a need for programming that targets boys and includes them in decisions regarding policies on sexual and reproductive health. It was recommended that we need to

- Make sure that as the adolescent boys and young men grow up they have access to knowledge about HIV prevention, gender-based violence prevention and men's health.
- Teach them about the risks of casual dating and intergenerational relationships.
- Emphasis of positive masculinities.
- Target boys early and provide them with information.

12)Global Fund Processes

Youth Engage took the opportunity to inform young people on the Global Fund processes, highlighting some of the basics for partners who wish to apply for the funds. The presenter stated that the funds are set aside to fight HIV, TB and Malaria. She also noted that young people's issues are at the centre of Global Fund which considers young people's issues a priority.

She further noted that Global Fund appreciates and values interventions by young people, providing an opportunity for young people to come up with their own solutions for the challenges that they face.

13)Conference Declaration

The key outcome of the conference was the Conference Statement crafted by young people at the conference. The statement contains key commitments by young people, highlights their key challenges and provides advocacy messages to policy makers in the region. Below is an excerpt of the

Conference Statement

Second Edition of the Southern African Regional Students and Youth Conference on SRH (SARSYC) Theme: "Building a Business Case for a Solid Future through Access to Youth Sexual Rights, Health Services, and Commodities."

13-15 July 2017- University of Johannesburg, South Africa.

Background

In 2015, Young people of Southern Africa came up with strategic idea to have a platform where stakeholders meet to collectively discuss the sexual and reproductive health challenges that young people face. The platform came about not only after realising the oneness of the challenges Southern Africa face but as a practical measure to step up combined efforts to tackle the increasing challenges of young people. The platform became known as the Southern African Regional Students and Youth Conference on SRH (SARSYC).



The first edition of this conference was held in August 2015 in Harare under the theme "Youth SRHR and the Post-2015 Agenda: A Time to invest in young people to harness the demographic dividend in Southern Africa." Among the key resolutions made at the conference was to hold similar conference biannually to continue to foster regional learning and sharing of best and promising practices among young people and different actors in response to the challenges of young people.

The second edition of the conference was held in July 2017 under the theme "Building a Business Case for a Solid Future through Access to Youth Sexual Rights, Health Services, and Commodities." The theme captures the necessity of taking steps and advocate for measures in SHR response that can mitigate the possibilities of the anticipated demographic dividend from becoming a demographic disaster, mostly through lack of focus and investment in students' education and SRH rights.

A total of 8 countries from Southern Africa and 321 delegates participated at the conference drawn from Zimbabwe, Botswana, Lesotho, Malawi, Namibia, South Africa, Swaziland and Zambia.

The following are the #SARSYC 2017 Resolutions.

We Acknowledge

- The increased recognition that we need to secure the future by investing in youth and all country efforts done to realize the demographic divided.
- The African Union for setting the tone and an agenda that puts young people as a priority group in developmental programs.
- The role of traditional leaders, community leaders, political leaders and the Regional Executive Committees in addressing the SRH challenges of young people.
- The continuous energy and commitment being demonstrated by young people to address their challenges, particularly by harmonizing efforts at regional level.
- The acceleration of comprehensive sexuality education programs at country level and the support from partners to make CSE work.
- The presence of in country programs at different levels to keep girls in school.
- The societies for beginning to embrace diversity, respect for human rights and embracing equality for all irrespective of one's sexual orientation or sex.
- The efforts by various organisations, especially youth led and youth focused organisations in spearheading programs for the youths, with the youth and for the youths.

We However Note:

- HIV incidence among young people is increasing.
- The continuous harassment, criminalisation, stigma and discrimination against the LGBTI Community.
- The increase in sexual violence acts, perpetrated against mostly young women and girls in the societies.
- Limited government funding towards supporting sexual and reproductive health programs across Southern Africa.
- The exclusion of young people in marginalised communities (e.g. Rural, farming, and mining areas) in SRH related programs.
- Limited capacity building of stakeholders in implementing comprehensive sexuality education.
- Limited involvement of young people in policy making and decision making processes.
- The lack of commitment and allocation of resources by governments in investing in research, particularly Bio-medical research initiatives.



- The deepening economic challenges among the youth population.
- Limited availability of other critical sexual and reproductive health commodities for young people, including sanitary wear, youth friendly condoms, and other contraceptive commodities.
- Limited programs and lack of sex and age disaggregated data on SRH, with a specific focus on people with disabilities, adolescents, and other key populations.
- The limited access to affordable and easily available youth friendly sexual and reproductive health services and commodities.

As Young People, We Commit Ourselves To:

- Adopt and encourage protective behaviours among the youth population to close the tap on new HIV infections.
- To be the change, taking action and initiating programs without waiting for governments to do it for us.
- Use our skills and innovation to spearhead creative programs that are youth cantered and that young people identify with.
- Embrace technology to advance SRH issues of young people.
- Meaningfully participate and spearhead advocacy programs towards scaling up youth access to SRH services in partnership with government.
- To be a responsible youth generation.
- To work together as young people and not engage in competition in addressing the challenges of young people, at local to regional level.
- To change our mind-sets, challenge stigma and discrimination of minority groups (Including LGBTIQ and young people selling sex).
- To document our own stories and be heard, for the purposes of influencing policy and practices.

We Call Upon Governments, Regional Entities, Health Providers, UN Agencies, CSOs, Parents and Guardians and Other Relevant Entities In Southern Africa To:

- Continue supporting programs that promote young people's access to sexual and reproductive health services.
- Promote collaborations between research organisations (including institutions of higher learning) and CSO in knowledge and evidence generation that can inform SRH response for young people
- Foster private-public partnerships in addressing the SRHR challenges of young people, particularly in resource mobilisation.
- Promote youth participation at all levels of influence, including promoting youth political involvement to ensure young people's issues are well represented in spaces where policies are made.
- Strengthen interventions and funding towards promoting comprehensive sexuality education
- Invest in knowledge generation through promoting research which covers diverse SRH issues (including biomedical researches) and promote use of the researches to inform responses
- Support youth led digital and other creative programs that are youth centered, youth focused and relevant to the 21st century youth generation.
- Support programs that promote inclusion of young people with disabilities and the LGBTI community.
- Support for integrated programs that enhance the socio-economic status of young people, including education and youth entrepreneurship and mentorship.
- Support programs that enhance collaborations, working together and collective efforts among the diverse CSOs and young people groups and movements at local and regional level.
- Support programs that tackle emerging issues affecting young people, including young people selling sex, sexual harassment, forced sex work, cyber-bullying, drug and substance abuse among others.







24 Jefferson Road Logan Park, Hatfield, Harare, Zimbabwe Tel +263 (0) 4 571184 , +263 (0) 4 571190, +263 (0) 772 146 247-9 sarsycconference@gmail.com / spiwe@saywhat.org.zw



