ADVOCACY BRIEF

ENHANCING YOUTH ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR) SERVICES

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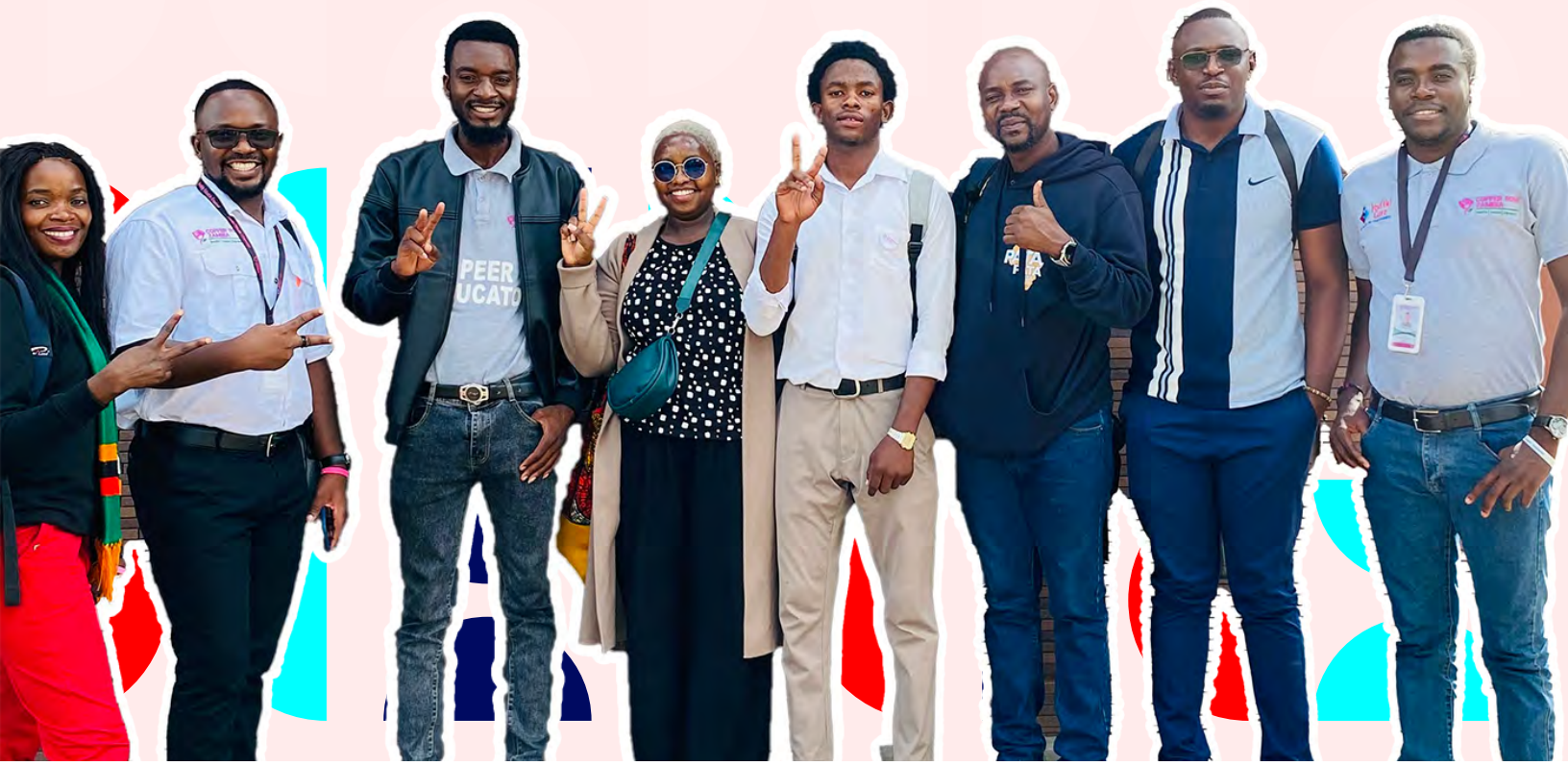

1. INTRODUCTION

The Sexual and Reproductive Health and Rights (SRHR) of young people remain a critical concern in Kenya. Despite significant progress in advancing youth health and well-being, numerous barriers persist, hindering young people's access to essential SRHR services. The current global health landscape is challenged by funding cuts, rising backlash movements, and this has implications to the overall health and wellbeing of young people..

This advocacy brief by the Network for Adolescent and Youth of Africa (NAYA) highlights the need for improved access to SRHR services for young people. Focus group discussions organised by NAYA with young people revealed significant barriers, including restrictive age of consent laws, inadequate access to comprehensive sexuality education, and limited youth-friendly health services. Additionally, “Many of the issues related to SRHR and HIV were sidelined as the government and donors focused on controlling COVID-19. This explains the increase in teenage pregnancies and new HIV infections during that period, one of the participants commented” This advocacy brief outlines key recommendations for policymakers, civil society organisations, and stakeholders to address these challenges and ensure that young people's SRHR are respected, protected and fulfilled.

The Sexual Reproductive Health Services Access Landscape in Kenya

In Kenya, the population is young, with those in the ages of 10-19 (adolescents) constituting 11.6 million, making it 22.2%, while those aged 18-34 years occupy 29% of the population. Despite efforts to harness the demographic dividend, the transitions for adolescents come with multiple and intersecting challenges that need significant public and policy attention that is evidence-based. The landscape of access to sexual reproductive and health services in Kenya is complex and influenced by various factors. Key challenges include: Restrictive Laws on the Age of Consent: Current laws hinder young people's access to SRHR services, including contraceptives and HIV testing. Limited Access to Comprehensive Sexuality Education: Inadequate education leaves young people without the knowledge to make informed decisions about their sexual health. Inadequate Access to Friendly Health Services: Health facilities often fail to provide confidential, non-judgmental services tailored to young people's needs.

Interventions

1. Reform Age of Consent Laws

Lower the age of consent for accessing SRHR services to 15 or 16 years, ensuring alignment with the realities of adolescent development. Reforming age of consent laws is a critical intervention to ensure that adolescents and youth have access to essential sexual and reproductive health (SRH) services. The current age of consent laws in Kenya, which require individuals to be 18 years or older to access SRH services without parental consent, can create significant barriers to care, particularly for adolescents who may not have supportive parents or guardians. The need for parental consent also strips young people of their autonomy in managing their health. The restrictive nature of the age of consent laws has led to an increase in teenage pregnancies and risky sexual behaviours. Due to fear of judgment, legal repercussions, or denial of services, many young people choose to avoid formal healthcare systems and instead resort to unsafe alternatives. Also, it is important to note that self-care is especially important for adolescents because it offers discreet, youth-friendly options. However, these benefits are lost if legal barriers persist. There is a strong sentiment among young people that Kenya is long overdue for a review of the age of consent. Many felt that the existing framework does not adequately reflect the realities young people face or support their right to access services and information.

> ***“We should align our laws with the realities on the ground. Young people are engaging in sexual activity much earlier, yet they are denied access to services because of the age of consent law.”***

Reforming these laws can help ensure that adolescents can access SRH services without fear of judgment or reprisal.

Adolescents have the right to make informed decisions about their bodies and health. Reforming age of consent laws can help promote autonomy and agency, enabling adolescents to take control of their SRH. Additionally, there is a need to create legal and policy environments that do not punish or stigmatise youth for seeking health services. To bridge the gap between legal requirements and practical access to services, there is need to develop a user-friendly, written document on consent. This document would explain what consent means in a simple way and could be used when young people seek services:

2. Integrate Comprehensive Sexuality Education

Incorporate age-appropriate, inclusive Comprehensive Sexuality Education (CSE) into school curricula to empower young people with accurate information. Integrating Comprehensive Sexuality Education (CSE) is a critical intervention to address Sexual and Reproductive Health and Rights (SRHR) related problems in Kenya. CSE is a holistic approach that equips young people with accurate and age-appropriate information, skills, and values to make informed decisions about their sexual health and well-being. Young people in Kenya often lack accurate and comprehensive information about SRHR, leading to misconceptions, myths, and risky behaviours. CSE fills this knowledge gap, providing young people with accurate and reliable information. CSE encourages young people to adopt healthy behaviours, such as delaying sexual debut, using condoms, and seeking STI testing and treatment. Additionally, CSE empowers young people to make informed decisions about their SRHR, promoting autonomy, agency, and self-efficacy. Giving young people the legal and social backing to make decisions about their health leads to improved autonomy and decision-making.

"Access and education give us the ability to decide for ourselves. That's the foundation of good self-care when we don't just wait to be told, but we understand and choose what's best for us." *This autonomy translates to more consistent service use, safer sexual behaviours, and reduced incidence of unintended pregnancies and HIV infections*

3. Enhance Youth-Friendly Health Services

Ensure health facilities provide confidential, non-judgmental services tailored to young people's needs, including trained healthcare providers and youth-friendly infrastructure. Enhancing youth-friendly health services is a vital intervention to address SRHR-related problems in Kenya. This involves transforming healthcare facilities into welcoming and non-judgmental spaces where young people feel comfortable seeking SRHR services. To achieve this, healthcare providers must receive training on adolescent-friendly care, including communication skills, confidentiality, and sensitivity to the unique needs of Adolescents and Youth. Healthcare facilities must also adapt their infrastructure to accommodate young people's needs, such as providing separate waiting areas, confidential counselling rooms, and youth-friendly educational materials.

Furthermore, healthcare services must be tailored to address the specific SRHR needs of young people, including contraception, STI testing and treatment, and HIV prevention and treatment. By enhancing youth-friendly health services, Kenya can increase young people's access to SRHR services, improve health outcomes, and reduce the stigma and discrimination that often surrounds SRHR issues. Ultimately, this intervention has the potential to empower young people to take control of their SRHR, make informed decisions about their health, and exercise their rights to quality healthcare.

4. Promote Assisted Consent Models

Implement assisted consent models, enabling young people to access services with the guided involvement of a trusted adult, balancing protection with autonomy. Promoting assisted consent models is a pragmatic intervention aimed at enhancing adolescents' access to Sexual and Reproductive Health and Rights (SRHR) services in Kenya. Assisted consent could bridge the gap. It respects our right to privacy and still involves adults in a supportive, not restrictive, way. This approach acknowledges the complexities of adolescent development and the need for a nuanced approach to consent. Assisted consent models involve a trusted adult, such as a parent, guardian, or healthcare provider, supporting and guiding an adolescent in making informed decisions about their SRHR. This approach balances the need to protect adolescents from harm with the need to respect their autonomy and agency. By promoting assisted consent models, Kenya can create a more supportive environment for adolescents to access SRHR services, including contraception, STI testing and treatment, and HIV prevention and treatment. This approach can also help to reduce the stigma and discrimination that often surrounds SRHR issues, while ensuring that adolescents receive the guidance and support they need to make informed decisions about their health and well-being. Ultimately, promoting assisted consent models has the potential to empower adolescents to take control of their SRHR while also promoting a culture of responsibility, respect, and care.

5. Inclusion of Young People in Policy Formulation

The group strongly advocated for the involvement of young people in the policy-making and influencing processes. They stressed that youth are the primary stakeholders in these discussions and must be at the center of designing laws and services that affect them. Young people's issues should not be discussed without them being in the room. Policies on youth SRHR must include their voices, experiences, and ideas. Creating an enabling environment through policy reforms and early education would allow young people to speak openly about their sexual health and take proactive steps, including the use of preventive HIV interventions such as Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP). Supportive policies and services would enable young people to take full ownership of their self-care, allowing them to manage their SRHR needs with dignity and confidence

"Self-care means being in charge of your body, your health, and your future. The right policies make it possible for us to do this confidently." *This includes using contraception, testing regularly for STIs and HIV, seeking mental health support, and making informed sexual decisions without external pressure or shame.*

6. Ensure Robust Policy Implementation and Public Sensitisation

While acknowledging that some progressive policies have already been formulated, young people continue to face significant barriers due to weak or inconsistent implementation at the community and facility levels. Policies often remain on paper, with limited awareness among frontline healthcare workers, community leaders, or even among young people themselves. During Focus group discussions, young people expressed concern that many well-written policies remain ineffective due to poor implementation and a lack of awareness. To address this, they recommended a robust rollout strategy for any new or revised policy, including public sensitisation campaigns.

"Even when policies are made, most people don't know about them. There is a need for clear strategies to implement and explain them to both youth and the public." *This would help reduce confusion, ensure accountability, increase service uptake and improve self-care. Moreover, access to accurate information and youth-friendly services empowers young people to protect themselves and others.*

They no longer operate in the dark or depend solely on informal, and often inaccurate, sources. ***"When young people are empowered with knowledge and access, they not only protect themselves but also help protect their partners and communities."*** *This shift is critical in driving behaviour change, increasing testing and treatment uptake, and promoting a culture of responsibility among adolescents*

2. CALL TO ACTION

Policymakers must prioritize the SRHR of young people, ensuring that they have access to the knowledge, services, and support necessary to protect their health, well-being, and human rights this can be done through reforming age of consent laws, integrating Comprehensive Sexuality Education, enhancing youth-friendly health services, and promoting assisted consent models, we can ensure that young people have the knowledge, services, and support necessary to protect their health, well-being, and human rights.

Policy makers should craft more effective and youth-friendly policies. These should clearly define the rights of adolescents in accessing SRHR and HIV services without criminalising them or making them feel ashamed

The Ministry of Health must acknowledge: *The diverse needs of young people is key to achieving inclusive healthcare because* ***Healthcare isn't just about treating an infection it's about taking care of the whole person. I need emotional and mental health support too."***

Work together to transform healthcare facilities into welcoming and non-judgmental spaces that cater to the unique needs of adolescents and youth

CSO and Youth Led Organisations Should

- Harmonise advocacy messaging among CSOs, especially on contentious issues like the age of consent. Discrepancies, such as some organisations supporting 18 years while others push for a lower age, were seen as weakening the collective impact.
- Equip adolescents and youth with the knowledge, skills, and confidence to make informed decisions about their SRHR.

Health Care providers and community-based advocates

should engage parents in dialogue sessions or health talks. ***"We need to encourage parents to speak openly with their children about SRHR. Many don't know how to start those conversations, but with proper guidance from health advocates, they can help young people make informed decisions."***

Young People

1. Advocacy for Policy Reforms That Reflect Their Realities

Young people must take the lead in advocating for policies that directly affect their lives, including calls to lower the age of consent to 15 years for access to SRHR services. ***"We, as young people, must advocate for what we need, whether it's lowering the age of consent, having youth-friendly services, or pushing for inclusive policies. We live these realities, so we should shape the laws."***

We also call upon young people to amplify their voices in community dialogues, youth forums, and national advocacy platforms to influence decision-makers

2. Government: Strengthen Policy, Funding, and Curriculum Support

- We call upon the Government of Kenya to take bold, systemic actions to support youth self-care and access to SRHR, including:

Incorporating Comprehensive Sexuality Education (CSE) into the school curriculum ***"CSE should be part of every school's curriculum. Young people must be taught early so they can make informed decisions."***

Increasing funding to public hospitals to expand youth-friendly services ***"More funding means more services, more trained staff, and less stigma when we seek help."***

Approving universal access to contraceptives, ensuring they are affordable, available, and tailored to youth needs

3. You(th) Care Project

- Should prioritize facilitating the implementation of existing youth-friendly policies especially those that relate to age of consent, access to SRHR services, and youth self-care