**PROMOTING ADOLESCENT’S SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS IN SOLWEZI DISTRICT**

**PROJECT PROPOSAL**

**ORGANIZATION BACKGROUND**

Charity Centre for Children and Youth Development is incorporated as a non-Profit voluntary Organization, working for community development through, Orphans and Vulnerable Children (OVC) educational support, Human Rights, Children and youth empowerment with special emphasis on marginalized boys and girls at grassroots level in Solwezi and Kasempa districts of North-western province of Zambia.

The organization founded in 2005 by a group of dedicated social workers. It is voluntary organization registered under the Societies Act Cap 119 of the Laws of Zambia. Charity Centre for Children and Youth Development has been working on different issues such as OVC educational support (So far the organization has provided educational support to 700 OVCs in Solwezi district with the support from PEPFAR US Embassy in Lusaka) Human Rights, Women Development, Youth Empowerment through entrepreneurship and vocational skills Training, Career Guidance, Sexuality, Reproductive Health, Family Planning, STIs, HIV and AIDS, etc. since 2005.

The focus of CCCYD is on community development through the participation of its own people. The role of CCCYD is strengthening and empowering the communities to perceive their own problems/needs, and to solve them through collective action and participation in planning and implementation of programmes and projects at CCCYD.

CCCYD envision a society that will work towards eradication of vulnerability, HIV and AIDS, illiteracy among Orphans and vulnerable children, youths and women and fight the violation of children’s rights.

The Organization’s mission is to promote and enhance the capabilities of children, youth and women in North Western Province and beyond to effect positive social change that would necessitate the development of their lives, communities and the nation at large.

So far, the organization has managed to provide training in reproductive health to 2000 youths in Solwezi district and we have distributed more than 6000 condoms to the young people who are sexually active in Solwezi which has resulted in reduction of unwanted pregnancies, STIs and HIV infections among the youth.

**Local needs/demographic**

Although Zambia has seen a reduction in the HIV prevalence rate over the years, the country is still among those most affected in the world, with a prevalence rate of 14.3 percent in the 15-49 year age group (Zambia Demographic Health Survey, 2007). Zambia has a population of just over 13 million, with over 50 percent under the age of 18.

Solwezi District is the provincial Capital of the North western province. It is a border town and the central commercial centre of the province. Solwezi district alone has a population of 239,051 (Census 2010) which accounts for 33.8% of the total provincial population. The district has three constituencies namely Solwezi Central, Solwezi East and Solwezi West. Solwezi Central were the project will be implemented has the largest population in the district. There are 126,182 people in the constituency with only 59,908 people above the 18 years. This means that 66,274 are below 18 years and account for more than 50% of the local population.

Due to the geographical and cultural nature of the district, access to information by the youth and vulnerable groups in the district has been a serious issue. Most information on sexual and reproductive health and rights is not readily available. This situation is also partly caused by wilful denial of information to youth and vulnerable groups by parents and other stakeholders that they are risky and unstable group. In a generation driven by luck of access to information, the exclusion of vulnerable people from vital information means that they are further pushed into frustration, poverty, destitution and contraction of HIV and STIs.

Adolescent girls and boys face a lot of problems as they transcend to adulthood. Most of these are related to their sexual and reproductive health. Adolescent girls and boys are recognized as one of the underserved categories and their sexual, reproductive health and rights (SRHR) related issues exist without concrete action plan in our district and the nation at large. There is marked absence of reliable data and information, which is indicative of the priority given to this age group in most societies. Young people’s knowledge regarding SRHR is limited. There is therefore an urgent need to provide proper services for contraceptives, HIV testing, Sexually Transmitted Infection (STI) treatment, condoms etc for young people to meet their SRHR needs.
Inadequate information, lack of privacy, cultural and traditional barriers, and general youth unfriendly environment are some of the barriers that youth face in accessing reproductive health services. This has contributed significantly to the unacceptable levels of ill-health and mortality rate in Zambia. In Solwezi district which is dominated by the Kaonde speaking people, it is a taboo for the adolescent to discuss sexual related matters with their parents and this has resulted in promoting ignorance among adolescent regarding their sexual reproductive health and rights and in this project we are going to promote parents and children communication on sexual reproductive health and rights without forgetting traditional readership.

**PROPOSED PROJECT DESCRIPTION (2-3)**

The aim of the project is to provide information about all aspects of sexual, reproductive health and rights of adolescent so that they are aware of the changes they go through and how they should protect themselves against sexual abuse, STIs and HIV/AIDS.

Adolescent sexual, reproductive health and rights project shall focus on the goal of sexuality education and parent-child communication to enable young people develop the knowledge, autonomy and skills such as communication, decision-making and negotiation to make the transition to adult-hood in good sexual health. The project includes information about sexual reproductive health, which includes puberty, pregnancy, STIs, and HIV/AIDS education. But it shall also address the relationships and emotions involved in sexual experience through peer education.

Since young people sometimes find it difficult or impossible to discuss sexual matters with adults, in this project we shall promote peer education. Young people often find it easier to talk to a friend or someone closer to their age group about sexuality. The training and involvement of young people as peer educators will ensure that programmes, activities, information and services are appropriate and relevant to young people’s concerns.

However, the extent to which parents are involved and the manner in which they are involved in their children’s lives are critical factors in the prevention of high-risk sexual activity. Children whose parents talk with them about sexual matters or provide sexuality education or contraceptive information at home are more likely than others to postpone sexual activity. And when these adolescents become sexually active, they have fewer sexual partners and are more likely to use contraceptives and condoms than young people who do not discuss sexual matters with their parents, and therefore are at reduced risk for pregnancy, HIV and other

Sexually transmitted diseases (STDs). Therefore, in this project we shall also promote parent-child sexual communication through The Parent Peer Education program which will addresse a community-identified need to increase parent-child communication about sexuality, teen pregnancy prevention, and related issues. Community members will be trained to lead discussions of peers on how to talk with their children about these topics

**Description of Technical Assistance (1-2 paragraphs)**

The organization is requesting for technical assistance in the following areas of need:

 **Organization Capacity Building**: We want to be trained in organizational development, this will enable all the members of staff to adapt to the techniques of the project and appreciate the initiative.

Furthermore, under the particular areas of programming for technical assistance, we are requesting training in the following areas: Life skills education, pregnancy prevention, comprehensive sexuality education, parent-child communication, advocacy and meaningful youth participation, youth leadership and youth adult partnerships.

**Existing partnerships/collaborations (1 paragraph)**

Charity Centre for Children and Youth Development works with both government institutions, NGOs and community based organization in most of its programmes. The organization has signed Memorandum of understanding (MOU) for provision of HIV and AIDS programmes with Solwezi Municipal Council, Moment of Hope counselling Foundation, Network of Zambian People Living with HIV and AIDS (NZP+) and Families Living Positively (FALIPO).We recently signed another Memorandum of understanding with Junior Achievement Zambia for the implementation of immersion Training Strategy targeting Young marginalized entrepreneurs in Solwezi district. The organization is also a member of the Solwezi district Aids Taskforce (DATF).

**Prospects for sustainability (1 paragraph)**

The project will be built on existing local community structures and build and strengthen their capacities. The trained leaders and peer educators will work as community volunteers/ facilitators and hence the acquired skills and knowledge will remain in the community and live beyond project period. In addition the use of participatory approaches and user friendly tools will make the interventions community friendly and the communities quickly adopt and own the project as their own; this is because the communities themselves will be the driver of the process and the skills acquired are transferrable and replicable to reach more peers and a wider community. The project will promote community participation and hence building of ownership to enable communities identify and solve own health program through the use of community action cycle approach and this will ensure sustainability of the project. The SRHR and gender toolkits for peer educators and parents will be developed and published in both English and local language will be copied and distributed in schools, girls and boys networks and health centres so that the project remains in operation beyond the grant period to initiate discussions in the community between parents, boys and girls.

Budget

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  **Sexual, Reproductive Health and Rights Project (SRHR)** |   |   |   |   |
| **Objectives and Activities** |   |   |   |   |   |
|  | **Item Description** | **Unity USD** | **Qty** | **Frequency** | **Total USD** |
| **Objective: 1** | **To impact knowledge and skills in 2000 adolecents Boys and Girls aged 10-24 about their sexual, reproductive health and rights for 12 months.** |   |   |   |   |
| **Activity 1** | **Training of 25 adolescent as peer educators on SRHR** |   |   |   |   |
|  |  Lunch  | 5 | 25 | 3 | 375 |
|  | soft drinks  | 1 | 25 | 3 | 75 |
|  | Transport | 10 | 25 | 3 | 750 |
|  | Coffee break | 4 | 25 | 3 | 300 |
|  | Water | 0.3 | 25 | 3 | 22.5 |
|  | Conference hall | 100 | 1 | 3 | 300 |
|  | Facilitators Allownace | 50 | 2 | 3 | 300 |
|  | Flip Chart | 6 | 7 | 1 | 42 |
|  | Markers | 1 | 10 | 1 | 10 |
|  | Note Books for participants | 2 | 25 | 1 | 50 |
|  | Pens for participants (Box) | 5 | 3 | 1 | 15 |
|  | Subtotal |   |   |   | **2239.5** |
| **Activity 2** | **Carrying out sentization awareness campaing on Adolescent SRHR** |   |   |   |   |
|  | Organizing events (poems, debates, theatre, drama) at 5 schools on SRHR |  100  |  5  |  3  |  1,500  |
|  | Buying and printing of T-shirts |  12  |  100  |  1  |  1,200  |
|  | Producing and printing of educational tools (posters, brochures, SRHR Toolkits) to be distributed in schools, Clinics and Communities. |  15  |  200  |  1  |  3,000  |
|  | Photocoping and Binding of SRHR Toolkits |  4  |  300  |  1  |  1,200  |
|  | Photocoping and Binding of SRHR Toolkits |  4  |  300  |  1  |  1,200  |
|  | **Subtotal** |   |   |   |  **8,100**  |
|  |  |  |  |  |  |
| **Objective: 2** | **To Promote Parent and Children Sexual reproductive health and rights communication targeting 200 parents for a period of 12 months in 4 communities** |  |  |  |  |
| **Activity** | **Training of 50 parents peer educators from different communities in adolescent SRHR** |   |   |   |   |
|  | Hall hire |  100  |  1  |  3  |  300  |
|  | Lunch for the Participants |  5  |  55  |  3  |  825  |
|  | Coffee break |  4  |  55  |  3  |  660  |
|  | Transport for participants |  10  |  55  |  3  |  1,650  |
|  | Flip Chart | 6 | 7 | 1 | 42 |
|  | Markers | 1 | 10 | 1 | 10 |
|  | Note Books for participants | 2 | 25 | 1 | 50 |
|  | Pens for participants (Box) | 5 | 3 | 1 | 15 |
|  | **SUB-TOTAL (II)** |  |  |  |  **3,552**  |
|  | **General Subtotal** |  |  |  |  **13,892**  |