

SRH in Zambia: Adolescent Perspectives

Report by HAI and MedRAP | [Download](#)

Adolescents in Zambia have long been excluded from conversations about their own health. They are also given limited decision-making power on the type of services and ways in which they are offered through the health system. This has dire consequences on the uptake of services and on the health of our young populations, which ultimately affects all domains of life in our society, including school, work, family and community.

This activity was undertaken by [Medicines Research and Action Platform](#) (MedRAP) and Health Action International (HAI) as part of the Solutions for Supporting Healthy Adolescents and Rights Protection (SHARP) programme, funded by the European Union. Twelve Focus Group Discussion (FGD) leads, consisting of six boys and six girls of 18-21 years of age, received a training on how to moderate and conduct FGDs. During this training, the leads developed a list of questions to be asked during the group discussions. Questions covered the following topics:

1. Definition and understanding of sexual and reproductive health (SRH).
2. Awareness on products and services offered at health facilities.
3. Places where SRH information and services are sought.
4. Perspective on health facilities efforts to engage adolescents in SRH services.
5. Motivations for accessing/not accessing SRH information and services.
6. Experiences and challenges when accessing SRH information and services.
7. Influence and attitudes of opinion leaders (e.g., government officials/healthcare providers).
8. Recommendations to improve access to SRH services for adolescents.

In total, 12 group discussions of 1-1.5 hours (six with boys and six with girls) were held in Southern- (Livingstone, Kazungula) and Luapula (Mansa) province of Zambia. For each discussion, participants were a diverse group of six to eight adolescents of 18-19 years of age. Discussion facilitators (leads) worked in pairs: group discussions for boys were each moderated by two male leads, and discussions for girls were moderated by female leads. The 12 group discussions were audio recorded and reported on anonymously. Consent was sought from the participants before the activity.

[Download the report](#) to find out more about the perspectives of adolescents on SRH in Zambia.