BRIEF REPORT

A Holistic Approach to Reproductive Health Interventions: Talk 2 Me Case Study

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Abstract

The Talk 2 Me project is a good example of putting knowledge into action and trying out best practices gained from conferences. The design of this project was based on knowledge shared by Straight Talk Foundation of Uganda during the 2008 “Investing in Young People’s Health and Development: Research that Improves Policies and Programs” in Abuja, Nigeria. The idea was to use peer educators in secondary schools to facilitate discussions on sexuality, HIV/AIDS, STIs, and other reproductive health issues. The innovative strategy was to record the stories of students as they were discussed and to publish them in a monthly newsletter (Talk2Me). The newsletters were shared among young people in and out of school, so they could learn from the discussions in the different school groups (Afr J Reprod Health 2010; 14[4]: 147-148).

Résumé

Une approche holistique aux interventions de la santé de la reproduction : une étude de cas de Talk 2 Me. Le projet de Talk 2 Me est un bon exemple de la mise en action de la connaissance et la mise à l’essai des meilleures pratiques acquises lors des conférences. La conception de ce projet était fondée sur la connaissance partagée par le Straight Talk Foundation d’Ouganda lors de l’« Investissement dans la santé et le développement des jeunes gens : Recherche qui améliore les politiques et les programmes », à Abuja, Nigéria. L’intention était de se servir des éducateurs de pairs dans les écoles secondaires pour faciliter des discussions sur la sexualité, le VIH/SIDA, ISTs et d’autres questions concernant la santé de reproduction. La stratégie innovatrice avait pour objectif d’enregistrer les histoires des étudiants comme elles ont été discutées et de les publier dans un bulletin d’information mensuel (Talk 2 Me). Les bulletins ont été distribués aux jeunes gens qui fréquentent encore l’école et ceux qui ne fréquentent pas l’école pour leur permettre d’apprendre à partir des discussions dans les groupes d’école différents (Afr J Reprod Health 2010; 14[4]: 147-148).

Keywords: Best practices, Sexuality, HIV/AIDS, STIs, Reproductive health issues

Introduction

Adolescent sexual and reproductive health is a critically important policy and programmatic issue in sub-Saharan Africa, given the AIDS epidemic that has taken hold in many countries as well as a persistently high level of adolescents childbearing. An estimated 4.3% of young women and 1.5% of young men aged 15-24 years in sub-Saharan Africa were living with HIV at the end of 2005 and 9-13% of young women had given birth by age 16. Clearly, young people need access to protective information and skills before they become sexually active in order to reduce their risk of contracting HIV and other sexually transmitted infections (STIs) and prevent unintended pregnancies and very early childbearing. The upsurge of HIV/AIDS and other STIs worldwide and its alarming effect on young people have caused researchers, program managers, NGOs, governments and donors to seek ways of educating people about their sexuality and reproductive health.

Different methods have been proposed and used; they have succeeded in some environments but not in all. Over the years policymakers have come to realize that countries should adapt strategies to their local settings. In the absence of reliable information on sexuality, young people are most likely to seek answers to their questions from their peers. The high incidence of HIV/AIDS among young people clearly illustrates the danger of ignorance and misinformation.

The mass media have become a major source of information about sexuality; mass media professionals can exercise their influence by providing accurate information and modeling.
responsible behaviours. The communication of accurate information adds realism and helps adolescents gain insights into their own sexuality, enabling them to make more responsible decisions about their behaviour.

**Method**

The major tools used in gathering information were questionnaires and focus group discussions. Trained peer educators facilitated 50 focus group discussions on different topics, five in each of 10 schools. Participants were students in the 10 schools who volunteered to take part in discussion groups that interested them. They shared personal stories, which were recorded. An editorial committee gathered these reports from the different groups and produced the monthly newsletter Talk2Me.

**Results and Discussion**

The young people were very excited about the project and looked forward to every meeting. A thousand youths from the 10 participating schools benefited directly (636 males, 364 females), while more than 5,000 others benefited indirectly through the newsletter. When surveyed, participants wrote that they enjoyed being a part of the whole process, from the discussions to the production of the newsletter.

Peer educators reported increased confidence and a better relationship with students who came for counseling and asked personal questions. The number of stories increased because everyone wanted to show their family and friends the newsletter. At the end of the project, a club (Champion’s Forum) was formed which meets once a month. All secondary school students and even those out of school are invited to join the club, which, it is hoped, will sustain the benefits of the newsletter project.

The emerging evidence demonstrating the vulnerability of young people, especially females to HIV infection and unplanned pregnancies, has highlighted the need to develop effective intervention programs to protect the next generation of adults in sub-Saharan Africa. Schools are generally considered to be one of the most important avenues for providing sex education to young people because most of them attend school at one time or another.

School-based sex education programs have evolved and increasingly gone beyond just the provision of information. Some programs now aim to build life skills, including negotiation, communication with partners, self-confidence, to empower young people to resist peer pressure, to understand their right to information and services to protect their sexual health.

**Conclusion**

Schools are an important site where young people can acquire knowledge and skills that equip them for responsible lifestyles now and in the future. Every intervention targeting young people should take into account their essentially fun-loving characters. They are at a stage where their self-esteem and confidence are being built, so activities that give them recognition, a feeling of belonging, and a sense of accomplishment kindle their interest. To improve youth-friendly services, traditional teaching methods should become more innovative and focus on participatory activities.

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**References**