

eTHEKWINI Ward 34 COUNCIL RAPID ASSESSMENT OF ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH (ASRHR)



JANUARY 2022

This fact sheet is a summary of the findings of the ASRHR Rapid Assessment undertaken in eThekwini Ward 34 Council as part of an eightcountry study¹ from November 2019 to December 2020. The research aims to strengthen youth-led and focused efforts to promote ASRHR through gender and youth-responsive local governance. Gender Links South Africa conducted the study in 29 Centers of Excellence for Gender in Local Government.² In eThekwini Ward 34, the study covered 1 clinic; 40 respondents: 50% young women and 50% young men (see table overleaf). This fact sheet should be read together with the South Africa and the Southern Africa ASRHR Rapid Assessment research pamphlets. Key findings include:

Accessibility

- All the respondents reported being within 10 km of a clinic.
- All the respondents, said that the clinic opens during weekends.
- Only 3% of respondents said that the clinic opens during weekends.
- All the respondents said that the clinic had a comfortable waiting area.
- The clinic does not charge fees for its services.

Quality of care

- All the respondents said they were treated with respect.
- All the young people in the study indicated that there was privacy at the clinic.
- Seventy-eight percent of respondents said the clinic did not require their parents to be present.

- All the young people indicated that health workers spent sufficient time with them.
- All the young people said they received appropriate information. Availability of information is a key component of ASRHR that gives young people a #VoiceandChoice.

Sexual and reproductive health services

- Eighty percent of young people requested contraceptives. All of those who requested contraceptives received them. This high percentage of young people requesting and receiving contraceptives is noteworthy as access to contraceptives is key to ensuring that ASRH is prioritised.
- All the young women in the study requested a pregnancy test and all of them received it.
 Thirty-three percent of young women were pregnant at that time.
- There is no demand for male circumcision, as none of the young men requested nor received an appointment. Male circumcision has been shown to reduce the spread of HIV and AIDS.
- None of the youth requested PREP and none requested post-exposure prophylaxis (PEP).
- All of the respondents requested an HIV test and all of those who asked for this test received it.
- All of the respondents said health workers asked about their mental health. This is noteworthy, as ASRHR and mental health are closely linked.
- All the young people in the study said that a follow-up appointment was set up and all were referred to a relevant facility.

FOR MORE INFORMATION go to:

https://genderlinks.org.za/what-we-do/governance/local-action-for-voice-and-choice/







¹ Botswana, Eswatini, Lesotho, Madagascar, Mauritius, South Africa, Zambia and Zimbabwe.
2 Blouberg, Brandwag, D'Almeida, Dana Bay, Emfuleni, Friemersheim, Great Brak, Hartenbos, Herbertsdale, Joburg City-Orange Farm-Region G, Joburg City-Soweto-Region D, Joe Slovo, Kwanonaqba, Lepelle Nkumpi, Midvaal, Mogale City, Molemole, Mossel Bay, Polokwane, Sonskyn Valley, eThekwini Ward 101, eThekwini Ward 11, eThekwini Ward 26, eThekwini Ward 27, eThekwini Ward 34, eThekwini Ward 68, eThekwini Ward 98 (Umkomaas), eThekwini Ward 98 (Umnini).

KEY DATA FROM THE RAPID ASSESSMENT OF ASRHR SERVICES IN eTHEKWINI Ward 34 COUNCIL SOUTH AFRICA

Indicator	eThekwini Ward 34	Sea Cow Lake
Total sample	40	40
% female	50%	50%
% gender non-conforming	0%	0%
% male	50%	50%
Logistic information on health facilities	00/0	0070
Health facility within 10km from your home %	100%	100%
The facility opens after school? %	100%	100%
The facility opens on weekends? %	3%	3%
The facility has a comfortable waiting and consultation area? %	100%	100%
Does the facility charge a fee? %	0%	0%
Average fee in USD	None	None
Quality of care	INOTIC	INOTIC
Peer counsellors available %	100%	100%
Young people treated with respect %	100%	100%
Young people treated without parent present %	78%	78%
Young people die fledied williout palerit present % Young people have privacy %	100%	
Young people have confidentiality %		
	100%	100%
Health workers spend sufficient time with young people %	100%	100%
Young people receive appropriate information %	100%	100%
Sexual and reproductive health services (%)		
Maternal health		
% Young people who requested contraceptives	80%	80%
% Young people who requested contraceptives that received contraceptives	100%	100%
% Young women who requested a pregnancy test	100%	100%
% Young women who received a pregnancy test	100%	100%
% Young women who were pregnant	33%	33%
% pregnant young women who requested ante-natal check-up	100%	100%
% pregnant young women who received ante-natal check-up	100%	100%
% pregnant women who requested prevention of mother-to-child transmission (PMTCT)	0%	0%
% pregnant women who requested PMTCT that received PMTCT		
% Young women who requested post-natal care	50%	50%
% Young women who requested post natal care who received post-natal care		
% Young women who requested help with breast feeding	0%	0%
% Young women who requested that received help with breast feeding		
Menstrual health	'	
% Young women who requested pads	0%	0%
% of those who requested pads that received pads		
HIV and AIDS and STI		
% Young men who requested male circumcision	0%	0%
% of those who requested male circimcision received an appointment	0,0	
% youth who requested PREP	0%	0%
% youth who received PREP	0/0	V /0
% who requested post-exposure prophylaxis (PEP)	0%	0%
% of those who requested who received PEP	0/0	U/0
% who requested HIV test	100%	100%
% of those who requested who received HIV test	100%	100%
% who requested STI test		
% who requested stries? % who requested who received STI test	100%	100%
·	100%	100%
% who requested anti-retrovirals (ARVs)	100%	100%
% who requested who received ARVs	100%	100%
% who said Health worker asked about mental health	100%	100%