





A Report for

# **PROJECT SAFIDY**

### Sexual and Reproductive Health and Rights Network Conference

April - 2020

#### Introduction

Project Safidy held its second Sexual and Reproductive Health and Rights (SRHR) Network Conference on November 6th and 7th 2019 in Madagascar's capital, Antananarivo. The event brought together 112 people representing 56 organisations and government ministries – all of whom are working towards the goal of improving SRHR in Madagascar. During the conference, stakeholders discussed the country's most pressing SRHR issues, whilst sharing innovative lessons for inclusively protecting young people's SRHR. Based on these learnings, the Project Safidy team collaborated with participants to develop a strategy for strengthening the SRHR network, with the goal of promoting SRHR advocacy, resource-sharing, and capacity-building across Madagascar.

#### **Conference Sessions**

The two-day conference commenced with speeches from leading SRHR advocates, who highlighted the scope of SRHR challenges in Madagascar. Opening his speech, Dr. Phillip Boyle, United Kingdom Ambassador to Madagascar, declared:

"At the heart of SRHR is the principle that all women and girls have the right to make informed decisions about sexuality and reproduction so that they can lead healthy lives, avoid unwanted sexual encounters, decide when and how many children to have, and be exposed to fewer risks during pregnancy and birth."

The Ambassador emphasised the importance of SRHR in improving health, education, and sustainable development in Madagascar, acknowledging the work of SEED Madagascar and the 55 other participating organisations who are championing the rights of women and girls across the country (Appendix One).

Director General of the Ministry of Public Health, Professor Gaétan Duval Solofomalala, discussed the importance of investing in sexual and reproductive health, whilst encouraging the establishment of a network to strengthen national SRHR advocacy. SEED Madagascar's Director of Programmes and Operations, Lisa Bass, echoed these sentiments, encouraging collaboration of SRHR actors to achieve shared goals in Madagascar.

Following these introductory speeches, the Project Safidy team organised eight panel discussions and presentations (Appendix Two), which covered the following SRHR themes.

• **Demographic dividend**: Participants expressed concerns regarding Madagascar's rapidly growing population, citing low access to and utilisation of contraception, sexual violence, and early marriage as barriers to effective family planning. Health Policy Plus<sup>1</sup> discussed the potential for jumpstarting economic growth in Madagascar by producing demographic dividends. Panellists explained that these gains can be generated through decreases in birth rates and the costs of supporting children and increases in workforce productivity. However, these guests emphasised that high fertility rates hamper social and economic growth in Madagascar by preventing many girls from accessing education and employment opportunities. To maximise this demographic dividend in Madagascar, WISH2ACTION<sup>2</sup> has advocated for increased family planning services to minimise maternal mortality and sexually transmitted infections (STIs), whilst expanding the proportion of the population that can participate in the country's development.

<sup>&</sup>lt;sup>1</sup> Health Policy Plus is an international project is funded by the United States Agency for International Development, which aims to strengthen Madagascar's healthcare policy framework.

<sup>&</sup>lt;sup>2</sup> WISH2ACTION is an international project funded by the Department for International Development, which aims to improve sexual and reproductive health services across Madagascar.

- Innovative SRHR approaches: Emphasising the importance of multisectoral initiatives, representatives from Blue Ventures Madagascar<sup>3</sup> described the organisation's integration of SRHR themes into its peer-led youth groups, which promote marine conservation in coastal regions. Similarly, an official from the Ministry of National Education discussed the success of incorporating SRHR topics into the national high school curriculum, which has created a sustainable mechanism for SRHR education delivery across Madagascar.
- Inclusivity in SRHR: Highlighting the universal right to sexual and reproductive health, presenters explained that SRHR interventions often fail to reach isolated and marginalised communities. Representatives from the Ministry of Public Health discussed the importance of expanding access to SRHR services to rural areas, where the birth rate is reportedly higher than in urban zones. Panellists discussed the need for comprehensive sexual education in isolated rural areas, where there is commonly low knowledge of SRHR and high incidence of risky behaviours, such as unprotected sex with multiple partners. As emphasised by an official from the Ministry of Population, Social Protection, and the Promotion of Women, these approaches must target vulnerable and marginalised populations. This Ministry official described government initiatives to institutionalise gender equality through the ratification of international- and national-level legislation. MAD'AIDS<sup>4</sup> described efforts to address the stigmatisation of people living with HIV by strengthening the healthcare system and educating the general population, whilst the Platform of Federations of Handicapped People in Madagascar<sup>5</sup> emphasised the importance of explicitly addressing the SRHR needs of people with disabilities across SRHR interventions.
- SRHR education: Panellists from organisations such as SEED Madagascar; the United Nations Educational, Scientific and Cultural Organisation; and Mahefa Miaraka<sup>6</sup> discussed their mission to address SRHR knowledge gaps through sex education lessons, whilst improving self-esteem and addressing negative gender norms. The United Nations Population Fund also shared their strategy of training young people to become peer-educators, who then teach other young people about SRHR topics and advocate for social change in their community. As emphasised by Médecin du Monde<sup>7</sup>, this SRHR education must be strengthened through exercises that help young people to reflect on their SRHR values and tackle harmful myths. The Project Safidy team discussed ongoing collaboration with the Ministry of National Education to integrate 12 SRHR topics into the high school curriculum across Madagascar. After the successful integration of the rights-based sexual and reproductive health curriculum into the first year of high school, Project Safidy shared SEED's plans of expanding SRHR education to second-year classes during the 2019-2020 school year.
- Madagascar's legal SRHR framework and advocacy: Whilst commending the national elimination of taxes for condoms earlier in 2019, panellists expressed the need for increased public spending on SRHR services, including family planning, to sustainably improve SRHR outcomes and reduce healthcare costs. In response, the Ministry of Public Health discussed plans to augment spending for family planning and announced the upcoming publication of a national SRHR strategy in 2020. Participants also discussed the SRHR support shown by the First Lady of Madagascar, Mialy Rajoelina, who has championed the elimination of gender-based violence earlier in Madagascar. With new laws expanding access to family planning services for marginalised groups, organisations suggested that Madagascar is on the path to inclusively promoting SRHR for future generations.

<sup>&</sup>lt;sup>3</sup> Blue Ventures is an international organisation that that intends to improve marine conservation through a holistic approach, which includes promoting sexual and reproductive health and food security.

<sup>&</sup>lt;sup>4</sup> MAD'AIDS is a national network of associations that supports people living with HIV.

<sup>&</sup>lt;sup>5</sup> The Platform of Federations of Handicapped People in Madagascar, which is comprised of 250 members nationally, conducts advocacy and sensitisation regarding the rights of people living with disabilities in Madagascar.

<sup>&</sup>lt;sup>6</sup> *Mahefa Miaraka* is a national-level project funded by the United States Agency for International Development, which aims to strengthen healthcare at the community-level in Madagascar.

<sup>&</sup>lt;sup>7</sup> *Médecins du Monde* is an international organisation that delivers education, medical service, and advocacy regarding SRHR, maternal and child health, and HIV/AIDS.

• **Perspectives from other networks:** Panellists from the Population, Health, and Environment (PHE) network<sup>8</sup> and the MenEngage network<sup>9</sup> shared best practices for sustainably bringing together SRHR organisations. The opportunity for leveraging the strengths of certain organisations, such as the ability of environmental groups to reach remote populations, was emphasised by the PHE representative. The panellist from MenEngage discussed the network's efforts to mobilise diverse groups of men and women to combat gender-based violence, highlighting the importance of holistic outreach for promoting SRHR.

#### **Strengthening the SRHR Network**

Informed by these discussions, conference participants shared their visions for strengthening Project Safidy's SRHR network. As four of the network co-founders, *Médecin du Monde*, Population Services International<sup>10</sup>, *Jhpiego*<sup>11</sup>, and Blue Ventures facilitated this exercise. Drawing on the mutual SRHR values voiced during panels, participants established the mission of the network as:

- Promoting SRHR discussions and SRHR advocacy;
- Reinforcing the technical and organisational capacity of network members;
- Facilitating the SRHR activities of network members; and
- Promoting SRHR research.

To strengthen the network's structure, participants established the mandate of a core group of co-founders, which have been selected based on their experience leading national-level SRHR initiatives. These co-founders will provide ongoing technical support to network members and raise awareness regarding SRHR activities. Participants also emphasised the importance of maintaining the neutrality of SRHR advocacy by limiting network membership to non-governmental organisations. Strategies for raising future network funding, including the development of consortium grants, were proposed to support the sustainability of this SRHR platform.

#### **Moving Forward**

Since the conference, the Project Safidy team has confirmed 22 network members, with additional organisations expressing interest in joining the platform. SRHR network convenings are held quarterly, during which members have shared resources and coordinated SRHR activities. These initiatives include the development of reference materials for standardised comprehensive sexuality education, which have been informed by Project Safidy's integrated SRHR curriculum and can be adapted to a variety of contexts. Based on the results of a capacity gap survey, the SRHR network is also planning training sessions with members to promote the high-quality delivery of SRHR information and services. To assess the impact of these sessions on members' capacity, Project Safidy is conducting a social network analysis, which will support a long-term strategy for collaboratively promoting SRHR across Madagascar.

<sup>&</sup>lt;sup>8</sup> The PHE network works with national-level organisations to combine the conservation of natural resources and biodiversity with the provision of family planning and health services.

<sup>&</sup>lt;sup>9</sup> Targeting men and boys, this national-level network promotes advocacy and sensitisation regarding human rights and gender-based violence in Madagascar.

<sup>&</sup>lt;sup>10</sup> Population Services International is an international organisation that aims to promote maternal and child health and sexual and reproductive health by strengthening supply chains and service provision.

<sup>&</sup>lt;sup>11</sup> Jhpiego is an international project that is funded by the United States Agency for International Development, which aims to strengthen maternal and child health in Madagascar.

# Appendix One: List of Organisational Conference Attendees

	Name of Organisational Attendees
1	Association des Chrétiens pour l'abolition de la torture (ACAT) Madagascar
2	AFRIYAN Madagascar
3	Association Ank'Izy
4	Action Socio-sanitaire Organisation Secours (ASSOS) Madagascar
5	Blue Ventures Madagascar
6	Commission Nationale Indépendante des Droits de l'Homme
7	Coalitions des radios
8	Coalition Malagasy pour le renforcement du système de santé et de vaccination
9	End Child Prostitution and Trafficking France - Madagascar
10	E-Miahy
11	EMPOWERMEN
12	FANAINGA
13	Fanilon'iMadagasikara
14	Fikambanam-Behivavy Malagasy Mihoatra
15	Fianakavania Sambatra
15	
	Groupement du Sud Health Policy Plus
17	
18	International Youth Alliance for Family Planning
19	Jhpiego
20	Réseau MAD'AIDS
21	Mahefa Miaraka John Snow, Inc.
22	Marie Stopes Madagascar
23	Médecin du Monde
24	MenEngage
25	Ministère de l'Education Nationale et de l'Enseignement Technique Professionnel –
26	Direction des Études et des Recherches Pédagogiques
26	Ministère de la Jeunesse et des Sports
27	Ministère de la Population, de la Protection Social et de la Promotion de la Femme
28	Ministère de la Sante Publique – Direction de la Santé Familiale
29	Mira Aina Association
30	Mpanazava eto Madagasikara
31	Ministère de l'Education Nationale et de l'Enseignement Technique Professionnel – Office
	de l'Éducation de Masse et de Civisme
32	ONG Green
33	Ordre des Médecins
34	Pact Madagascar
35	PFNSE
36	Plateforme des Personnes Handicapées
37	Population, Health, and Environment Madagascar
38	PIVOT
39	Projet Jeune Leader
40	Population Services International Madagascar
41	Sampan'asa Loterana Momban'ny Fahasalamana
42	Secrétariat Exécutif du Comité National de Lutte contre le SIDA à Madagascar
43	SEED Madagascar
44	TANDEM
45	TanoraGaran'Teen
46	Tanora Iray
47	Tanora Namako
48	Tily eto Madagasikara

49	British Embassy Antananarivo
50	United Nations Educational, Scientific and Cultural Organization
51	United Nations Population Fund
52	United States Agency for International Development ACCESS Program
53	WaterAid
54	Wish2Action
55	Young Men's Christian Association Madagascar
56	Youth First

# Appendix Two: Conference Agenda

Heures	Activités	Lieux
	Jour 1	
8:15 - 9:00	Acceuil des participants	Toit de Tana
	Procédures administrative et logistique	
9:00 - 10:00	Cérémonie d'Ouverture :	Toit de Tana
	<ul> <li>Mot de bienvenue</li> <li>Réflexion sur la SDSR</li> <li>Série de discour</li> </ul>	Plénière
10:00 - 11:00	Panel de discussion	Plénière
	<< La SDSR, un des leviers de développement pour Madagascar>>	
	Avec le Ministère de la Santé Publique, UNPFA, HP+, WISH2ACTION, UNESCO	
11:00 - 11:30	Pause-café et interview des médias	Hall
		Toit de Tana
11:30 - 12:20	Panel préformé 1 :	Plénière
	< <cadre :="" de="" défis="" et="" familiale="" juridique="" la="" madagascar="" planification="" réalité="" à="">&gt;</cadre>	
	Panélistes : MinSanP – HP+	
12:30 - 14:00	Pause déjeuner et réseautage	Restaurant
14:00 - 15:00	Panel préformé 2 :	Plénière
	< <approche :="" de="" défis="" et="" la="" madagscar="" reproductive="" réalités="" santé="" sexuelle="" socio-anthropologique="" à="">&gt;</approche>	
	Panélistes : Médécin du Monde – SEED – Mahefa Miaraka	
15:00 - 16:10	Panel préformé 3 :	Plénière
	< <approches innovatrices="" la="" pour="" promouvoir="" sdsr="">&gt;</approches>	
	Panélistes : MENETP – MenEngage – ECPAT France – Blue Venture	
16:10 - 16:20	Récapitulatif de la journée et remerciement	Plénière
	Jour 2	-
8::30 - 9:40	Panel préformé 4 :	Plénière
	< <stigmatisation :="" approche="" d'une="" discrimination="" et="" inclusive="" promotion="" équitable="">&gt;</stigmatisation>	
	Panélistes : MPPFPS – PSI – MAD'AIDS – PFPH MAD	
9:50 - 10:50	Panel préformé 5 :	Plénière
	< <communication changement="" le="" pour="" social="">&gt;</communication>	
	Panélistes : Médecin du Monde – Projet Jeune Leader – PSI	
11:50 - 11:10	Pause-café et réseautage	Hall
		Toit de Tana

11:15 - 12:00	Présentation: < <guide efficace="" plaidoyer="" pour="" pratique="" un="">&gt; Par Marie Stopes Madagascar</guide>	Plénière
12:15 – 13:15	Pause déjeuner	Restaurant
13:15 – 14:05	Panel préformé 6 : < <approche impact="" large="" plus="" pour="" réseau="" un="">&gt; Panélistes : PHE – MenEngage</approche>	Plénière
14:15 – 15:30	<ul> <li>Réseau SDSR</li> <li>Présentation du Cahier du Charge du réseau SDSR suivi d'une discussion en travaux de groupe ;</li> <li>Validation du document en session plénière ;</li> <li>Présentation des cofondateurs ;</li> </ul>	Travaux de groupe Plénière
15:30 - 16:30	<ul> <li>Cérémonie de clôture :</li> <li>Lancement officiel du réseau SDSR et appel à soumission du formulaire d'adhésion ;</li> <li>Série de discours</li> <li>Pause-café et réseautage</li> </ul>	Plénière