Graphical user interface, application, PowerPoint

Description automatically generated

**Working Together to End Inequalities**

#GetTested #GetVaccinated

#NoRegrets

February 2022

**REPRODUCTIVE HEALTH MONTH**

*Sexual Reproductive Health: Sexually Transmitted Infections, Condoms, Pregnancy Awareness*

**“Working together to end inequalities, promote sexual reproductive health services, sexually transmitted infections prevention and condom utilization”**

Table of Contents

[1. Background 1](#_Toc94258681)

[1.1. Sexual Reproductive Health 1](#_Toc94258682)

[1.1.1. Sexually Transmitted Infections 1](#_Toc94258683)

[1.1.2. STIs and Pregnancy 2](#_Toc94258684)

[1.1.3. Pregnancy 2](#_Toc94258685)

[1.1.4. Preterm Births and Teenage Births 2](#_Toc94258686)

[1.1.5. Syphilis and hepatitis B in Pregnancy 2](#_Toc94258687)

[1.1.6. Voluntary Male Medical Circumcision 2](#_Toc94258688)

[1.2. Adolescent and Youth 3](#_Toc94258689)

[1.2.1. Risk 3](#_Toc94258690)

[1.2.2. Vulnerability 3](#_Toc94258691)

[2. CAMPAIGN THEME & OBJECTIVES 4](#_Toc94258692)

[2.1. Objectives of the Campaign 4](#_Toc94258693)

[2.2. Target Audience 5](#_Toc94258694)

[2.3. Campaign Messages: STIs, Condoms & Pregnancy 5](#_Toc94258695)

[2.4. Educational Messages on STIs/Condoms & Pregnancy 5](#_Toc94258696)

[3. Campaign approach 6](#_Toc94258697)

[3.1. Proposed Activities 6](#_Toc94258698)

[3.2. Campaign Workplan 6](#_Toc94258699)

[3.3. Deputy Ministers special activities 4](#_Toc94258700)

[3.4. Programme activities 4](#_Toc94258701)

[8. Monitoring & Evaluation: Data Collection and Reporting 1](#_Toc94258702)

[9. Annexures 2](#_Toc94258703)

[Annexure A: Key Activities During February 2022 2](#_Toc94258704)

[Annexure B: Collins Chabane Activity Plan 3](#_Toc94258705)

# 1. Background

Reproductive health awareness month is a yearly campaign designed to raise awareness on sexual and reproductive health and promote contraceptives, improve sexual health, to raise awareness on interventions, including condom use and voluntary male medical circumcision to prevent the acquisition of HIV and other sexually transmitted infections (STIs) and teenage pregnancy.

## 1.1. Sexual Reproductive Health

Sexual Reproductive health implies that people can have a satisfying and safe sex life. Reproductive health means that everyone has the liberty and capability to reproduce, the freedom to decide if they want to reproduce, when and how often to do so. However, reality has proven that is not always the case. Sexual and reproductive health is a challenge for some men and women.

Infertility has been defined by the World Health Organisation as a disease of the reproductive system where there is failure to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse.

Reproductive health services are important tools in promoting men and women's well-being especially women as it contributes to their empowerment. Providing family-planning, infertility, counselling, information, and education is a greater contributory factor towards the achievement of gender equality and equity and towards ending inequality. Having control over reproduction and sexuality can contribute to empowering women in other areas, such as education, health, and employment.

Medical conditions such as sexually transmitted infections, smoking and alcohol may cause infertility

### 1.1.1. Sexually Transmitted Infections

HIV and sexually transmitted infections collectively cause 2.3 million deaths and 1.2 million cases of cancer each year and continue to impose a major public health burden worldwide. More than 1 million people are newly infected with sexually transmitted infections, although progress has been made in all three disease areas, the global response is off-track and most global health targets for 2020 were missed. The full benefits of available tools and technologies are not being realized, many populations are left behind, and structural, systemic, and financial barriers persist. The COVID-19 pandemic has further hampered progress, and accelerated action is needed to end these epidemics.

Sexually transmitted infections often do not cause symptoms or may have long asymptomatic periods and thus can be unknowingly transmitted during sexual intercourse or during pregnancy. Women and girls are disproportionately affected by sexually transmitted infections. When left untreated, sexually transmitted infections can, depending on the nature of specific infections, lead to long-term irreversible and potentially fatal outcomes including chronic pelvic pain, cancers, ectopic pregnancies, infertility, adverse pregnancy outcomes, neonatal death, and congenital abnormalities. Some sexually transmitted infections can also facilitate HIV acquisition

In South Africa, it is a cause for concern that with – 7.9 million people living with HIV in 2020 and a high volume of STIs. In 2017, there were an estimated 2.3 million new cases of gonorrhoea, 1.9 million new chlamydia cases, and 23,175 new syphilis cases among women aged between 15 and 49. Among men of the same age, there were an estimated 2.2 million new cases of gonorrhoea, 3.9 million new cases of chlamydia, and 47,500 new cases of syphilis. These high numbers of STI cases in South Africa have partly been due to inadequate prevention and treatment. Some people with STIs such as chlamydia may go untreated because they do not show any symptoms.

### 1.1.2. STIs and Pregnancy

Untreated STIs are associated with adverse pregnancy and neonatal outcomes. Curable STIs are associated with maternal morbidity,3 preterm birth, low birth weight, and stillbirth.4–6 Preterm birth is the leading cause of under-five mortality globally.7 A World Health Organization (WHO)-led study in 2013 found that prematurity and its associated complications were the largest contributor to mortality in children globally accounting. In addition, there are around 2.6 million stillbirths per year of which 7% to 30% are caused by STIs or other infections.10–12 About 50% of untreated maternal infections are transmitted to the neonate during birth. Treating partners reduces the likelihood of re-infecting the index patient and decreases the burden of infection.

### 1.1.3. Pregnancy

Evidence from sub-Saharan Africa indicates that 35% of pregnancies among women especially those from 15–19-year-olds were unplanned, unwanted, or untimed and that the teenagers' relationships were unstable.4,5 In addition, children of teen mothers are more likely to be malnourished and suffer from developmental problems (UNFPA, 2007). The use of condoms to decrease the risks of STDs will continue to be important for adolescents, to delay pregnancy until one is at least: older than the age of 19, are physically matured, with any medical or phycological challenges under control and managed and socio-economic factors in a reasonable state manage all the aftermath of pregnancy, birth and raising a child.

### 1.1.4. Preterm Births and Teenage Births

The leading causes of perinatal deaths in South Africa are complications from preterm birth, followed by intrapartum-related complications, such as birth asphyxia, infections, and congenital abnormalities and still births.24. Higher risks of preterm birth and small for gestational age babies have been reported in teenagers. The association between young maternal age and adverse pregnancy outcome has been attributed to gynaecological immaturity and the growth and nutritional status of the mother. Young people have ample opportunity to seek health education interacts with health services and use contraception and condoms to prevent contracting STIs and to delay pregnancy until physically prepared.

### 1.1.5. Syphilis and hepatitis B in Pregnancy

* The current trends of seroprevalence of HIV/syphilis co-infection and syphilis infection overtime through the national surveillance systems indicates the re-emergence and rising syphilis infections with high risk of congenital syphilis which calls for robust early dual testing, screening of women and management in pregnancy treating of congenital syphilis. 120
* Whilst horizontal transmission during childhood remains the primary mode of HBV transmission, vertical transmission from mother to child remains an important mechanism of infection in countries with high HBV prevalence.
* Health care workers need to be aware of the required management of an HBV-infected mother and her infant as outlined in the National Guidelines for the Management of Viral Hepatitis.

### 1.1.6. Voluntary Male Medical Circumcision

South Africa continues to have the world’s largest HIV epidemic. In 2018, an estimated 7, 7million people were living with HIV (UNAIDS, 2019). To date over 4.4 million men have been medically circumcised in the country (NDoH, 2021). To date, the national VMMC programme has achieved extraordinary scale having circumcised close to 4.4 million men initially, NDoH had set a target of 4.3 million circumcisions by the end of 2016. In addition to this target, the programme continues to scale-up services and has set ambitious targets of circumcising an additional 2.5 million men by 2022 to reach 80% of HIV-negative men aged 15-49 years (South African National AIDS Council, 2017).

**The main goals of VMMC are to:**

* Reduce risk of HIV acquisition among sexually active or soon to be sexually active males
* Promoting responsible male sexual behaviour and encouraging men to support their female partners and children to meet their sexual and reproductive health needs.
* Male circumcision services for older boys and young men offer an opportunity to provide sexual and reproductive health education and counselling. Sexual and reproductive health education and services are as important for men and adolescents as for women. Many people and organisations can provide information and services, including parents, teachers, non-governmental organisations, churches, and youth groups, as well as health care providers in outpatient, family planning, STI and HIV clinics.

## 1.2. Adolescent and Youth

According to Stats SA, over 15 million people are aged between 10 and 24 years, which accounts for 25,5% of the total population. Most people in South Africa who are younger than 15 years reside in Gauteng at 21,5% followed by KwaZulu-Natal at 21,1%. With over a quarter of South Africans between 10 and 24 years, the National Department of Health has identified youth and adolescent health services as a priority. Nationally, there are approximately 888 primary healthcare facilities offer adolescent and youth-friendly service programs. During quarter 2 of 2021, the headcount among 10- to 19-year-olds was 1,7 million.

When considering reproductive health among youth, it is important to consider the factors that contribute to the risk and vulnerability of a person or a population group. It is important to raise awareness of the risks and vulnerabilities among youth to ensure they are accountable and remain knowledgeable.

### 1.2.1. Risk

Risk is defined as the probability that a person may acquire HIV, an STI or have an unplanned pregnancy. Certain behaviours create, enhance, and perpetuate risk. Examples include unprotected sex with a partner whose HIV status is unknown; multiple unprotected sexual partnerships; injecting drug use with contaminated needles and syringes.

### 1.2.2. Vulnerability

Vulnerability results from a range of factors that reduce the ability of individuals and communities to avoid HIV infection, STI or an unplanned pregnancy.

These may include:

1. Personal factors such as the lack of knowledge and skills required to protect oneself and others.
2. Factors pertaining to the quality and coverage of services, such as inaccessibility of services due to distance; or,
3. Societal factors such as social and cultural norms, that can act as barriers to essential prevention messages.

These factors, alone or in combination, may create or exacerbate individual vulnerability and, as a result, collective vulnerability to HIV. Behavioural intervention strategies that can be used to reduce the previously discussed risks and vulnerabilities include:

1. Communication strategies to promote partner reduction, condom use, uptake of HIV counselling and testing services.
2. HIV /STI / Teenage Pregnancy Education.
3. Interpersonal communication including peer education and persuasion; or,
4. Social marketing prevention.

# 2. CAMPAIGN THEME & OBJECTIVES

***CHEKA IMpilo***

**Theme****: “*Working together to end inequalities, promote SRH services, STI prevention and Condom Utilization* “**

**Sub Theme: “*Advocacy & Action through Young People Sexuality Education, living a Healthy Lifestyle and promote protection through vaccination and dual protection “***

February is a Sexual and Reproductive Health and Healthy Lifestyle Month. The awareness weeks and days that are incorporated in the month of February are as follows:

|  |  |
| --- | --- |
| **Date** | **Events** |
| 4 Feb 22 | World Cancer Day |
| 14 Feb 22 | International Epilepsy Day |
| 8-14 Feb 22 | National Epilepsy Week |
| 10-16 Feb 22 | Pregnancy Awareness Week |
| 12-16 Feb 22 | STI\Condom Week |
| 2 Feb - 31 Mar | Human papillomavirus (HPV) vaccination first round |
| 18 Feb | Health Lifestyle Awareness Day |

## 2.1. Objectives of the Campaign

To inform women on the range of methods mix of family planning

* Create demand for family planning methods
* To encourage individuals to use dual protection (condom + contraceptive = Dual protection and to get Vaccinated)
* To promote Vaccination Roll -out among Young People and Adolescents
* To ensure that individuals and communities understand the importance and usage of contraception and planning for healthy pregnancies
* To educate individuals on female and male condom usage
* Reduce unplanned pregnancy (especially amongst adolescent girls and young women)
* Inform, educate, and counsel on HIV and STIs prevention
* To create demand for Voluntary Medical Male Circumcision (VMMC)

## 2.2. Target Audience

During the pandemic schools have been closed or not easily accessible, schools are a source of sexuality education, and of condoms. Thus, the target populations for the Reproductive Health campaigns are youth:

* **Primary target:** the audience of the campaign are young people aged 10 to 24 years from various localities and socio-economic conditions.
* **Secondary target:** general population 25 and above.

## 2.3. Campaign Messages: STIs, Condoms & Pregnancy

Condoms prevent transmission by reducing the risk of exposure to HIV or STIs occurs during sex. Laboratory studies show that the materials used to make most condoms (such as nitrile, latex, polyurethane, and polyisoprene) do not allow bacteria, viruses, or other germs to pass through them.

Therefore, condoms act as a barrier to HIV and STI infection by preventing the mouth, vagina, penis, and rectum from being exposure to:

* bodily fluids (such as semen, vaginal fluid, and rectal fluid) that can contain HIV and STIs and/or skin infected by an STI (such as herpes and syphilis sores or genital warts).



## 2.4. Educational Messages on STIs/Condoms & Pregnancy

| STI & CONDOM MESSAGES | PREGNANCY EDUCATION |
| --- | --- |
| * abstain and delay the beginning of the FIRST sexual debut * be mutually faithful to one sexual partner * use condoms correctly and consistently every time I have sex to protect me from unwanted pregnancy and STI, including HIV * know my HIV status by testing every three months * know signs and symptoms of STIs (burning urine, abdominal pains, smelling discharge and sores around the genitals) * seek medical help with the sign of STIs * inform my partner/s when infected with STIs to receive early treatment * always communicate my health status (including my HIV and TB status) to the healthcare provider to receive appropriate intervention and for me and my partner to be checked and tested for STIs including HIV * To know my TB status by going for TB screening | * know my HIV and TB status and that of my partner before planning pregnancy * To plan pregnancies before 35 years of age to decrease the risk of foetal abnormalities * To abstain and delay sexual activity and other risky behaviours (multiple partners/drugs/alcohol abuse) as a young person * To use contraception in addition to the use of condoms * To always use condoms correctly and consistently when having sex even during pregnancy * To eat healthy and exercise regularly * To stop drinking any alcohol, smoking, or taking illicit drugs to prevent foetal abnormalities * To stop self-medication /taking any medication not prescribed by the health care provider Ÿ take and adhere to prescribed medication * To take folic acid together with my contraceptive method to prevent foetal abnormalities (three months before planning pregnancy) * To be aware of my health status and medical condition before planning pregnancy * To visit the nearest health care facility when not feeling well * To if HIV positive and pregnant, take and adhere to antiretroviral (ARV) treatment, to stay healthy and to prevent infecting the child with HIV * Carry your Health Card when going to the facility |

# 3. Campaign approach

The campaign activities will be executed through a three-phase approach namely, pre, during, and post February 2022, this will be done to sustain the visibility of the campaign. Additionally, all the below-mentioned activities will amplify the COVID-19 messaging and content with a specific focus on young people. Emphasis should be made that it would be critical to harmonize all the stakeholder's efforts and capacities to achieve greater mileage for this campaign. Health care workers should be properly sensitized, capacitated and cautioned about the spike in demand creation that could lead to communities requesting services from health care facilities and partners.

## 3.1. Proposed Activities

* Community outreach (blitz)/dialogues with Men in the Rural Areas, TVETS and Learners
* Youth Zone support visit
* Awareness drive that will be influenced by the data on the ground (Social mobilisation – door to door) to the provinces
* Health care workers dialogues sensitization campaign SRH and Prevention strategies
* Key population activations - Men having Sex with Men (MSM), Sex Workers (SW), people with disability, the youth, the aged, women etc.
* Proposed Roll-out of SRH services at TVETS campuses
* Covid 19, Infection Control and Prevention and Vaccination Rollout
* Ministerial Support for STI /SRH condom Week

## 3.2. Campaign Workplan

The following table describes the proposed *Sexual, Reproductive Health and COVID-19 Youth Vaccination Awareness and Social Mobilization campaign* schematic plan. The below-proposed activities are subject to approval by the Director-General: Health. It is recommended that the commemoration week interventions should be a collaboration between the department of basic education and the department of health.

| Proposed Activity | Proposed Time Frame | Lead Stakeholder and Partner/s | Proposed Province/Venue/Platform/s |
| --- | --- | --- | --- |
| PHASE 1 | | | |
| 1. Mobilize partners to support and implement a mass media and virtual campaign to amplify SRH, prevention, and COVID-19 vaccination | Commence from February 2022 up to March 2023 | * Lead Partner: NDOH * GCIS * Higher Health * UNFPA * WHO * Lovelife, Soul City | * **Virtual**: Nationally across the national mass media platforms * shown at schools during life orientation |
| 2. Harmonize and integrate youth COVID-19 vaccination campaign as part of the 2022 World TB Day Campaign. Amplify the issue of ANC booking before 20 weeks, vaccines are safe for pregnant women. | March 2022 | * Lead Partner: NDOH * SANAC * TB Programme Partners * Lovelife, Soul City, Lifeline * GCIS | * Host Province: **Northern Cape and Nationally** * Amplify this initiative through the national mass media platforms |
| 3. Roll out a Young People's Flagship Campaign and amplify COVID-19 vaccination by Deputy Minister of Health in Collins Chabane Municipality | 19 March 2022 | * Lead Partner: NDOH * UNFPA * Lovelife, Soul City, and Lifeline * GCIS | * Host Province: **Limpopo Province** * Amplify the initiative through the national mass media platforms |
| 4. Amplify COVID-19 vaccination for youth as part of the Healthy Lifestyles campaign through a high-level social mobilization activation | May 2022 | * Lead Partner: NDOH * Health Promotion Partners * LoveLife, Soul City, Lifeline * Get Down Productions * GCIS | * Host Province: **North West** * Amplify nationally through mass media platforms |
| PHASE 2:  INTENSIFIED AND CONTINOUS COMMUNITY BASED SOCIAL MOBILIZATION OUTREACH | | | |
| 5. Embark on a Cheka Impilo Healthy Lifestyles activation with the Higher Education Sector and youth in and out of school | June 2022 | * Lead Partner: NDOH * Higher Health * NYDA * Lovelife, Soul City, Lifeline * GCIS | * Proposed Host Province: **Mpumalanga** * Amplify this initiative through the national mass media platforms |
| 6. Convene a High level Sexual and Reproductive Health Campaign dialogue targeting the Youth with Disability as part of the 2022 Youth Month | Last week of June 2022 | * Lead Partner: NDOH * SANAC Disability Sector * Lovelife, Soul City, Lifeline * Get Down Productions * SRH Sector Partners * UNFPA * WHO * Disability Sector NGOs * NYDA * Department of Arts and Culture * DBE | * Host Province: **Gauteng** * Amplify this initiative through the national mass media platforms |
| 7. Activate a SRH conversation/dialogue targeting young and aspirant undergraduate health care students at University of Limpopo | August 2022 | * Lead Partner: NDOH * Higher Health * Lovelife, Soul City, Lifeline * Get Down Productions * SANAC Women Sector * UNFPA * GCIS | * Host Province: **Limpopo** * Amplify this initiative through the national mass media platforms |
| 8. Activate a COVID-19 Youth vaccination social mobilization activation in partnership with the LGBTQI Sector | September 2021 | * Lead Partners: NDOH * SANAC LGBTQI Sector * Lovelife, Soul City, Lifeline * Get Down Productions * Higher Health * UNFPA * GCIS | * Host Province: **Western Cape** * Amplify this initiative through the national mass media platforms |
| 9. Roll out a responsible behaviour activation event post the 2022 World AIDS Day event | Mid-December 2022 | * Lead Partner: NDOH * SANAC Youth Sector * Lovelife, Soul City, Lifeline * NYDA * UNFPA * UNAIDS * GCIS | * Host Province: **Kwazulu-Natal** * Amplify this initiative through the national mass media platforms |
| 10. Condom promotion and distribution by community leaders and influencers discussions around the role of the Church in HIV/STI and Teenage pregnancy eradication. | January 2023 | * Faith Based Sector * Lovelife, Soul City * DBE * Youth Sector NGOs | * Host Province: **Northern Cape** * Amplify this initiative through the national mass media platforms |
| 11. Truck Wellness Activation in High burdened districts. Cover condom Use Dialogues with Youth |  | * Men's Sector * Youth Sector NGOs | * Host Province: **Free State** * Amplify this initiative through the national mass media platforms |
| 12. Roll out community based social mobilization activation outreach activations targeting young people in selected districts | From March 2022 to April 2023 | * Lead Partner: NDOH * NGO's and CBO's funded by the NDOH * GCIS | * Target Provinces with low vaccination uptake * Amplify this initiative through the national mass media platforms |
| 13. Parent / Care Giver sexual health communication campaign | From March 2022 to April 2023 | * Lead Partner: NDOH * NGO's and CBO's funded by the NDOH * GCIS | * Amplify this initiative through the national mass media platforms |
| PHASE 3:  AMPLIFY COVID 19 VACCINATION, PREVENTION AND SRH INTO THE 2023 CAMPAIGN | | | |
| 14. Kick-start the 2023 SRH Campaign build-up activities virtually through media platforms as part of 2023 back to school activation | Commence and coincide with the 2023 school reopening schedule and calendar | * Lead Partner: NDOH * GCIS * Higher Health * UNFPA * WHO * Lovelife, Soul City, Lifeline * DBE | * Host Province: **Eastern Cape** * National: Virtually and through the national mass media platforms |
| 15. Commemorate the 2023 SRH Campaign and continue to amplify Prevention, SRH, and COVID-19 vaccination | The first week of February 2023 | * Lead Partner: NDOH * SANAC * Higher Health * UNFPA * GCIS * UNAIDS * Lovelife, Soul City, Lifeline * DBE | * Host Province: **Mpumalanga** * Amplify this initiative through the national mass media platforms |

## 3.3. Deputy Ministers special activities

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activity | Approach | Lead | Dates | Venue |
| Conceptualisation of the campaign | * Technical team conceptualise the campaign and submit to Minister | Deputy Minister | 30 January 2022 |  |
| Outreach events | * Invite social cluster Deputy Minister * Visit to the facility implementing youth zone * Interaction with targeted youth * Outreach activity * Community radio station interview * National radio interview * Delegate official or MEC to adopt the sub district | Deputy Minister | May/October 2022 |  |

## 3.4. Programme activities

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Activities | Approach | Lead institutions | Date | Venue |
| Finalise Collins Chabane youth project the detail implementation plan for | * Meeting with technical team * Meeting with stakeholders * Meeting with youth representatives |  | 18-20 Jan 2022 | Collins Chabane |
| Radio interviews and PSA on sexual and reproductive health and rights | * Recording (content SRH&R and covid 19 vaccination) * Flighted on community radio stations * On national radio station |  | 01-28 Feb 2022  11-28 Feb 2022 | Radio broadcasting |
| Integrated sexual and reproductive health and Rights | * Youth dialogues and Youth festivals * Youth Dialogue lead by DM * Outreach event * Community radio station interview |  | 14-17 Feb 2020  18 Feb 2022 |  |
| Higher education comprehensive service outreach event partnership with higher health | * Higher education event to encourage intake of services including Covid19 vaccination |  | February/March 2022 | Identified Institutions of higher learning |
| Social media content | * Promote integrated comprehensive sexual reproductive health services and encourage Covid19 vaccination |  | * February 2022 * (SRH Month) * June 2022 (Youth Month) * August 2022 * Nov/Dec 2022 * (16 days of activations and WAD) | Social Media Platforms |
| Outreach event and visit DREAMS implementing site | * Brief on the programme * Interaction with beneficiaries * Main outreach event |  | March 2022 |  |
| Visit Soul City implementation site | * Brief on the programme * Interaction with beneficiaries * Main outreach event |  | March 2020 |  |
| Visit to Collins Chabane youth projects | * Visit to Valoyi tribe cheka Mpilo youth project * 1 hour meeting with the provincial and district team * Visit facility implementing youth zone * Visit one school implementing the project (roll out of zululwazi model) * Dialogue with young people to give feedback on project progress * Outreach youth event to official launch the Collins Chabane youth project |  | April 2022 |  |
| Outreach event and visit Global fund AGYW implementing site | * Brief on the programme * Interaction with beneficiaries * Main outreach event |  | May 2022 |  |
| Visit loveLife implementation site | * Brief on the programme * Interaction with beneficiaries * Main outreach event |  | May 2020 | Kwanobuhle Y-Centre |
| Youth month social media campaign | * Market youth zone, B-wise and encourage vaccination for Covid19 |  |  |  |
| Youth month outreach event | Youth dialogues and Youth festivals  Youth Dialogue lead by DM  Outreach event  Community radio station interview |  | June 2020 |  |
| Youth month virtual closing event | All activities conducted in June captured  Round table discussion  DM keynote address to close youth month activities |  | 30 June 2022 |  |
| Outreach event and visit bumbingomso implementing site | Brief on the programme  Visit facility implementing youth zone Interaction with beneficiaries  Main outreach event |  | July 2022 | Buffalo City |
| Nelson Mandela day youth activity |  |  | 18 July 2022 |  |
| Women’s month outreach event |  |  | August 2022 |  |
| Heritage event and support visit to Collins Chabane project | Visit clinic implementing youth zone Youth dialogue  Visit school implementing the youth project  Cultural event |  | September 2022 |  |
| Gender based violence outreach event | Youth dialogues and Youth festival  Youth Dialogue lead by DM  Outreach event  Community radio station interview |  | November 2022 |  |
| World aids day youth celebration event | Youth dialogues and Youth festival  Youth Dialogue lead by DM  Outreach event  Community radio station interview |  | December 2022 |  |
| Follow/Feedback Session with Artist, Influencers and social activists | Planning and feedback session. Implementation analysis |  | December 2022 |  |

# 8. Monitoring & Evaluation: Data Collection and Reporting

**Proposed high level indicators:**

1. Number of Communities mobilized.
2. Number of campaigns implemented (Social mobilization: Activations, Outreach Campaigns, Dialogues etc).
3. Number of young people reached with services in terms of demand creation (HTS, TB Services, COVID-19 vaccination, Screening for NCD’s etc, STIs screened).
4. Number of IEC Materials distributed.
5. Number of young people reached through mass media platforms (including Print media coverage, Audience ratings, listenership and coverage in respect to other platforms for instance: social/digital media etc).
6. Number of people reached through community radio station.
7. Number of male and female condoms distributed.
8. Number of contraceptives supplied.
9. Number of community dialogues conducted.
10. Number of TVETS reached.
11. Number of school activations conducted.

# 9. Annexures

## Annexure A: Key Activities During February 2022

*2022 Sexual and Reproductive Health Month/STI/Condom/Teenage Pregnancy/ Healthy Lifestyle Awareness/COVID-19 Week Key activities*

|  |  |  |  |
| --- | --- | --- | --- |
| Activity | Time Frame | Key Stakeholder/s | Proposed Venue/Platform |
| 1. Implement an SRH/STIs/Condom week/Teenage Pregnancy teaser campaign through digital platforms | Thursday, 10 February - Monday, 28 February 2022 | * NDOH * Youth Sector ACSM Partners * SRH Partners | * Through digital/virtual platforms * Mass media platforms |
| 2. Implement a youth focused Healthy lifestyles/COVID-19 vaccination teaser campaign | Monday, 21 February - Monday, 28 February 2022 | * NDOH * Youth Sector Partners * SRH Partners * Health Promotion Partners | * Through digital/virtual platforms * Mass media platforms |

## Annexure B: Collins Chabane Activity Plan

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ACTIVITY | RESPONSIBLE PERSON | OBJECTIVES | TIME FRAME | INTENDED OUTCOMES | STAKEHOLDER/PARTNERS TO BE INVOLVEMENT |
| Sub district profile | Sub district DoH and local areas managers  (DISTRICT COORDINATORS) | To understand the demographics  Burden of disease  Services rendered  Sub district priority needs  Socio economic status  Challenges and achievements | 28 February 2022 | Address challenges and dissatisfaction related to service delivery | Sub district  Local Authorities- Councillors  DBE |
| Conduct baseline study in the sub district  Delivery under 10-19 years  HIV Prevalence  TP in school  Facilities rendering CTOP | DOH (at all levels)  Supporting Partners  (DISTRICT COORDINATORS) | Risk identification and the affected population  Track lost to follow-up cases  Encourage adherence  Address the means related to family planning methods | February 2022  On going | Reduce teenage pregnancy  Young people to adhere to their appointment.   * Family planning * Follow up treatments * Access to TOP services * SRH services in school * HPV vaccination access | District and Sub District  Supporting partners  National and Province |
| Consultation meeting with DoE | loveLife &  Soul City | Inform them about the project  Strengthen Work relations | 01-04 February 2022 | Access to schools  Learner involvement in the project  Strengthen utilization of SRHR services  Integration of services and access  School Community involvement  Involvement of supporting partners | District and Sub District  Supporting partners  National and Province |
| Consultation with DSD | loveLife &  Soul City | Bye in from DSD to fully participate in the projects and lead in their area | 01-04 February 2022 | Strengthen collaboration of department, improve service provision with special focus on Psychosocial support and layering School Community involvement  Involvement of supporting partners | DOH, DOE, DSD, SOUL City & loveLife |
| Consultation with the Municipality | loveLife &  Soul City | Bye in from the Municipality and use multisectoral approach in the project for effective implementation of the project | 08-12 February 2022 | Strengthen collaboration of department, improve service provision with special focus on Psychosocial support and layering School Community involvement  Involvement of supporting partners | DOH, DOE, DSD, Collins Chabane Municipality, SOUL City & loveLife |
| Consultation with the traditional leaders | loveLife &  Soul City | Bye in from Traditional leaders and use multisectoral approach in the project for effective implementation of the project | 01-12 February 2022 | Strengthen collaboration of department, improve service provision with special focus on Psychosocial support and layering School Community involvement  Involvement of supporting partners | DOH, DOE,DSD, Collins Chabane Municipality, Contralesa, SOUL City & loveLife |
| Consultation with all stakeholders | District / sub district Health and Partners (loveLife &  Soul City) | Bye in from all stakeholders and use multisectoral approach in the project for effective implementation of the project | 01-04 February 2022 | Strengthen collaboration of department, improve service provision with special focus on Psychosocial support and layering School Community involvement  Involvement of supporting partners | DOH, DOE, DSD, Collins Chabane Municipality, Contralesa, SOUL City & loveLife |
| Establishment of sub district task team | District / sub district Health and Partners (loveLife &  Soul City) | Planning and monitoring of the project structure and submission of progress report to relevant institutions | February 2021 | Effective planning, implementation and monitoring of the project, clear reporting channels and compilation of reports with clear roles and responsibilities | DOH, DOE, DSD, Collins Chabane Municipality, Contralesa, SOUL City & loveLife |
| Establishment of task team Shigwezi, Mhinga and Bungeni local area | District / sub district Health and Partners (loveLife &  Soul City) | Planning and monitoring of the project structure and submission of progress report to relevant institutions | February 2022 | Effective planning, implementation and monitoring of the project, clear reporting channels and compilation of reports with clear roles and responsibilities | DOH, DOE, DSD, Collins Chabane Municipality, Contralesa, SOUL City & loveLife |
| Establishment of task team Tiyani and Mphambo local area | District / sub district Health and Partners (loveLife &  Soul City) | Establishment of Planning and monitoring of the project structure and submission of progress report to relevant institutions | February 2023 | Effective planning, implementation and monitoring of the project, clear reporting channels and compilation of reports with clear roles and responsibilities | DOH, DOE, DSD, Collins Chabane Municipality, Contralesa, SOUL City & loveLife |
| Meeting with Principals | DOH, DOE  and Partners (loveLife &  Soul City) | Introduce the project and | February 2022 | solicit bye in and identify criteria and processes to identify schools for adoption | DSD, loveLife, Soul City |
| Each clinic adopts a school | DOE, DOH  and Partners (loveLife &  Soul City) | Strengthening the implementation of ISHP | March 2022 | Improve access of services to young people to reduce teenage pregnancy, HIV new incidence and improve intake of contraceptives | DSD, loveLife, Soul City |
| Training of security companies in our clinic | District DOH (PHC) | Capacitate security staff on AYFS to better understand young people | May 2022 | Improve access of services to young people to reduce teenage pregnancy, HIV new incidence and improve intake of contraceptives | DOH, DOE,DSD, Collins Chabane Municipality, Contralesa, SOUL City & loveLife |
| Provision of health service in Shingwezi TVET | District DOH (PHC) | Improve Access to Health Care Services | June 2022 | Improve access of services to young people to reduce teenage pregnancy, HIV new incidence and improve intake of contraceptives | DOH, DOE,DSD, Collins Chabane Municipality, Contralesa, SOUL City & loveLife |
| Strengthen SRH service provision by training health providers on insertion of Implanon(Larc) and IUD | DOH | Improve quality of services in health facilities | May 2022 | Improve access and availability of services by young people | loveLife, Soul City |
| Mentoring the training of trained health providers | DOH | Support and enhance the skills provided during training | June 2022 and ongoing | Improve access of health facilities and services by young people | loveLife, Soul City, DSD, |
| Celebrate the health calendars  Youth Month  Womens month  16 Days of activism against GBV  WAD celebration | DOH, DOE, DSD, Partners( Soul City& loveLife) and young people | Create Awareness on Health Promotion | Feb 2022  June 2022  Aug 2022  Nov 2022  Dec 2022 | Awareness on the project, promote youth zones, all health-related issue and encourage people to vaccinate for covid 19 to reduce health social ills | loveLife, Soul City , DSD, Municipality, traditional leaders |
| Training of Traditional Leaders | DOH and Partners( Soul City& loveLife) | Promote Access to Health Care Services | March 2022 | Capacitate Traditional Leaders on health related issues | loveLife, Soul City, DSD, |
| Awareness during community imbizo | DOH, Contralesa, DOE, DSD, Partners( Soul City& loveLife) and young people | Create Awareness on Health Promotion | May 2022 | Awareness on the project, promote youth zones, all health-related issue and encourage people to vaccinate for covid 19 | DOH, loveLife, Soul City, DSD and Municipality, traditional leaders |
| Implementing Parenting programme | DOH, DOE, DSD, Partners( Soul City& loveLife) and young people | Capacitate Parents and Strengthen Support and Relationship with Young people | July 2022 | Capacitation on Youth Zone and Health Care Services | loveLife, Soul City, DOH, traditional leaders and Municipality |
| Born free dialogues between parents and young people | DOH, DOE, DSD, Partners( Soul City& loveLife) and young people | To share experience and Challenges facing young people. | July 2022 | Closing the communication gap between parents and children and improve parental skills | loveLife, Soul City, DSD and Municipality |
| Awareness Campaigns on Gambling, Unemployment and other health related topics | DOH, DOE, DSD, Partners( Soul City& loveLife) Municipality, SAPS and Limpopo Gambling Board | Formation of youth group and youth mobilisation | February 2022 on going | Reducing the high rate of employment and free gambling from youth | Government Departments and SA Gambling Board of South Africa |
| Peaceful ( March) Protests regarding to Rape and sexual harassment | SAPS, DOH, DOE, DSD, Partners( Soul City& loveLife) and Therapist | Consulting with relevant | May 2022 | Decrease the number of rape and sexual harassment | SAPS, Traffic Officials and DSD |
| Establish the Social Clubs | DoH (PHC) Soul city & loveLife | Door to Door recruiting | January 2022 | Decrease number of rape and sexual harassment | DoH, DSAC, DOE and |
| Establishment of Peer group clubs | DoH (PHC) Soul city & loveLife | Clinical Youth Clubs | February 2022 | Promote Access to Health Care Services | DOH (PHC), SOUL CITY AND LOVELIFE |
| Fundraising to assist the unemployment | Community leaders and young people | Looking for funding from the municipalities local | First Quarter 2022 | To provide youth coming from poor family to get basis needs and fighting against child gambling | Chiefs. Civic organisation, Municipalities and local business people |
| SRHR Education and Peer pressure | Doh, Social workers and  youth organisations | Being present during workshops and recruitment of new members | Feb-July 2022 | To increase the knowledge to youth about sex, sexuality and rights | DoH, Parents. Youth Organisation, DSD Social workers ,SAPS |
| Arts and Culture activities  Initiating Modelling agency | Sport and Arts and Culture department | Recruiting teams and activating the sports activities | Once per week | To take youth away from substance abuse | Municipality and Sport officers |
| Establishment of community clubs lead by youth for youth | Ward councillor and Induna and young people | * Leading the formed clubs | February 2021 | To develop youth leaders | Lovelife, Soulcity Institute, DoH and DSD |