



**USAID**  
FROM THE AMERICAN PEOPLE

**FHME**NGAGE  
Healthy Markets for Healthy People

---

---

# Frontier Health Markets (FHM) Engage

## OUTCOME REPORT

Public-Private Dialogue Strengthening Youth-Driven Demand for Family Planning and Sexual Reproductive Health in Sierra Leone

---

**November 2023** (Finalized in December 2024)

# Frontier Health Markets (FHM) Engage

## OUTCOME REPORT

### Public-Private Dialogue Strengthening Youth-Driven Demand for Family Planning and Sexual Reproductive Health Services in Sierra Leone

#### Author:

**Sahr Abraham Grass-Sessay** (Principal Consultant Pathfinder Intl. & Managing Director | ILEM-Africa)  
Edward Benya, Musa Turay, Alfred Jusu, and Sarah Kamara (Assignment Assistants @ ILEM-Africa)

#### Acknowledgements:

Appreciation to Dr. Tom Sesay| Director for Sexual Reproductive Health and Family Planning, Ministry of Health; Mme. Patricia Bah| Natl. Coordinator, Teenage Pregnancy Secretariat; Mme. Sibeso Mululumu| Deputy Country Director, Gamachis Shogo| Technical Specialist, RHCS, and Musu Kawusu-Kebbay| YIP Consultant of UNFPA for their audience during our bilateral engagements and their valuable insights provided that shaped the preparation for this Public-Private Consultative Dialogue. I also appreciate the active participation of Hon. Chernor Bah| Minister of Info. and Civic Education; Mr. James Riak Mathiang| Country Director of GOAL; and Mr. Aiah Sosokoeneh, Senior Health Specialist from USAID.

I wish to extend gratitude to participants who took part in the Key Informant Interviews conducted by Mr. Oliver Le Touze (FHM Engage Consultant). The outcome of this engagement provided a deep dive into youth Family Planning (FP) market in Sierra Leone and presented case studies with priority profiles of youths which facilitated group discussions during the Workshop. A special “Thank You” to Tertiary Care Hospitals, Pharmaceuticals, and District Focal Persons on FP/SRH from the Teenage Pregnancy and Child-health Secretariat for their expert contribution during the interactive sessions which provided valuable insights into existing gaps and defined opportunities for programme intervention in the sector. Many thanks to the youth-led organizations, and the media for joining us in defining a roadmap on youth-driven demand for better FP and SRH access in Sierra Leone. Immense gratitude is extended to the dedicated staff of ILEM-Africa Consultancy Firm for orchestrating and facilitating this impactful gathering. Their support to me in the conduct of this assignment played a crucial role in advancing dialogue on sexual and reproductive health and family planning. As an institution, ILEM-Africa look forward to facilitating a common space for public and private sector interactions in the FP marketplace, where tools, approaches, and research can inform future co-design programme intervention in Sierra Leone.

#### Submitted to:

Pathfinder International, and FHM Engage USAID

#### Prepared by:

© ILEM-Africa Consultancy Firm 2023 [www.ilem-africa.org](http://www.ilem-africa.org). All rights reserved.  
Address: 17a Bolling Street, Kingtom Freetown, Sierra Leone | West Africa



#### DISCLAIMER

This material is made possible by the generous support of the American people through the United States Agency for International Development (USAID) under the terms of cooperative agreement no. 7200AA21CA00027 (2021-2026). The content of this Workshop Report outlines the conduct of the Public-Private Dialogue Strengthening Youth-Driven Demand for Family Planning held in Sierra Leone. This Report compiled by the Principal Consultant and Managing Director of ILEM-Africa does not necessarily reflect the views of FHM Engage, Pathfinder International, USAID or the United States Government.

# Contents

<b>Cover Page</b> (Title  Author  Acknowledgement  Disclaimer) -----	i.
<b>Acronyms and Definitions</b> -----	2.
<b>Executive Summary</b> -----	3.
- Introduction	
- Institutional Brief	
- Thrust of the National Public-Private Dialogue	
<b>Country Outlook (Family Planning and Sexual Reproductive Health)</b> -----	4.
<b>Assignment Scope</b> -----	5.
1. Conduct a Rapid Assessment of Key Market Stakeholders	
2. Illustration of the 5Ps Framework Identifying Market Entry Points for Improving Youth FP Market in Sierra Leone	
3. Co-Facilitate a National Private-Public Consultative Dialogue	
<b>Objective of the National Public-Private Dialogue</b> -----	9.
- General Objective	
- Specific Objectives	
<b>Deliverables</b> -----	11.
<b>Overview of the Public-Private Dialogue</b> -----	11.
- Opening Session	
- Group Work and Thematic Presentations	
- Workshop Expectations	
- Key Findings	
- Recommended Interventions	
- Conclusion	
- Vote-of-Thanks	

**Annex I:** PPD Workshop Agenda

**Annex II:** Participant List

**Annex III:** Co-Designing, Visioning, and Prioritization Session

## Acronyms

CBOs	Community-Based Organizations
CHW	Community Health Worker
EU	European Union
DHMT	District Health Management Team
FCDO	Foreign, Commonwealth and Development Office
FHM Engage	Frontier Health Markets Engage
FP	Family Planning
GoSL	Government of Sierra Leone
ILEM-Africa	Institute of Leadership, Energy, Environment and Management (Consultancy Firm)
IMPACT	Improving Market Partnerships and Access to Commodities Together
IRC	International Rescue Committee
LDCs	Least Developed Countries
MBSSE	Ministry of Basic and Senior Secondary School Education
MDA	Market Demand Approach
MoH	Ministry of Health
MSSL	Marie Stopes Sierra Leone
NGOs	Non-Governmental Organizations
PPD	Public Private Dialogue
RHCS	Reproductive Health Commodity Security
RMNCAHN	Reproductive Maternal Newborn Child and Adolescent Health Nutrition
SLBC	Sierra Leone Broadcasting Corporation
SLDHS	Sierra Leone Demographic and Health Survey
SOPs	Standard Operating Procedures
SRH	Sexual and Reproductive Health
STI/Ds	Sexually Transmitted Infections/Diseases
UNFPA	United Nations Population Fund
UNICEF	United Nations Children’s Fund
USAID	United States Agency for International Development
YLOs	Youth-Led Organizations
WHO	World Health Organization

# Executive Summary

## Introduction

Frontier Health Markets Engage (FHM Engage) is a global cooperative agreement project of the United States International Agency for Development (USAID) designed to provide technical assistance (TA,) supporting local actors to improve the ability of health markets to meet supply-side capacity gaps and consumer preferences, contributing to equitable provision of access to high-quality family planning (FP) and other health services and products in mixed health systems. Building on over 30-year sector investment experience, FHM Engage applies the Market Development Approach (MDA) that focuses on strengthening local health markets by addressing the root causes of market failures in the core market functions to create the necessary behavior change that catalyzes supply, demand and supports for sustainable change that contribute towards two main results.

- **Result 1:** Improved market environment for greater private sector participation in the delivery of health products and services.
- **Result 2:** Improved equal access to an uptake of high-quality consumer driven health products, services, and information.

## Institutional Brief

Pathfinder International is driven by the conviction that all people, regardless of where they live, have the right to decide whether and when to have children, to exist free from fear and stigma, and to lead the lives they choose. Since 1957, Pathfinder has been partnering with local governments, communities, and health systems to remove barriers to critical sexual and reproductive health services. Together with its partners, the organization has contributed to expanding access to contraception, promoting healthy pregnancies, saving women's lives, and stopping the spread of new HIV infections. The work of Pathfinder International has ensured over the years that millions of women, men, and young people can choose their own health paths.

## Thrust of the National Public-Private Dialogue

The Public-Private Dialogue and Co-Design Workshop held on 26<sup>th</sup> and 27<sup>th</sup> October 2023 was convened by Pathfinder International, USAID's, Frontier Health Markets (FHM) Engage, in collaboration with the Ministry of Health of Sierra Leone. This national dialogue was coordinated and facilitated by ILEM-Africa. The two-day interactive Public-Private Dialogue aimed at "*Strengthening Youth Driven-Demand for Family Planning and Access to Sexual Reproductive Services in Sierra Leone*". This august gathering that sought to comprehensively investigate the Sexual and Reproductive Health (SRH) and Family Planning (FP) ecosystem in Sierra Leone, was attended by government representatives (including the Minister of Information and Civic Education, representatives from the Ministry of Health, and District Healthcare Professionals), the private sector comprising of the pharmaceutical industry, healthcare professionals, youth-led organizations, development partners (the UN, INGOs and NGOs), and USAID.

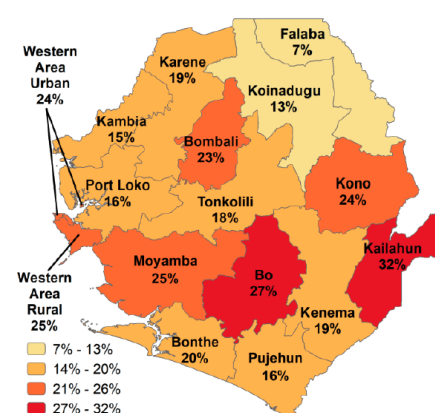
With the apparent limited supply of the FP/SRH services and products in Sierra Leone, the thematic dialogue amongst key stakeholders fostered a deeper understanding of the entire spectrum of awareness and education, licensing process required to establish FP and SRH networks, service delivery system with understanding of the regulatory frameworks governing them. The Workshop also outlined social, cultural, religious, and psychological norms influencing market-driven demand and underpinned pivotal factors shaping youth-driven demand for SRH and FP services in Sierra Leone. The dynamic composition of participants provided an opportunity for a comprehensive examination of Sierra Leone's FP and SRH landscape during the two days National Consultative Dialogue

## Country Outlook (Family Planning and Sexual Reproductive Health)

Located on the West Atlantic Coast of Africa, Sierra Leone is one of the LDC countries ranked 163 of 190 countries with a surface land area<sup>1</sup> of 72,300 km<sup>2</sup> and a population estimated at 7.8 million. The country is bordered by Guinea in the Northeast and Liberia along the Southeast. Freetown being the capital City of Sierra Leone, the country is characterized by its vibrant culture and diverse landscapes adorned by 500km of coastal mangroves, woodhills, uplands plateau and mountains, including Mount Bintumani rising to 1,948 meters which is the highest mountain in West Africa.

Despite this picturesque setting, the country is grappling with significant challenges in managing the demand and accessing FP products and services. It is reported that the use of FP varies between 7% and 32% across the country. MMR in SL is among the highest in the world at 717 per 100,000 live births. Sierra Leone's youth face a multitude of health service **challenges stemming from factors such as limited awareness, unavailability of service points in hard-to-reach communities, limited skill set of service providers, cultural norms, and socio-economic disparities.** Adolescents often lack comprehensive knowledge about sexual health and contraception, resulting in high rates of unintended pregnancies, STI/Ds, and unsafe abortions. These challenges are exacerbated by societal stigma, inadequate education, and barriers to accessing healthcare services. The Government of Sierra Leone has demonstrated a commitment to improve the health outcomes of its youth with the formulation of policy frameworks like the **National Adolescent Health and Development Policy, National Strategic Plan for Family Planning,** and the establishment of a Teenage Pregnancy and Child Marriage Secretariate. These efforts underscore the importance the government gives on issues related to FP and SRH services for youth. Achieving impact would require collaborative efforts across multiple Stakeholder Landscapes. The landscape of youth SRH in Sierra Leone encompasses a diverse array of stakeholders, each playing a unique role in shaping access to FP/SRH services. In the Public Sector, government bodies overseeing health, education, youth affairs, social welfare, and gender play a crucial role in policy development and implementation. Donors and Development Partners, comprising international organizations and donor agencies, provide essential funding, technical expertise, and support for SRH programmes.

Percentage of currently married women age 15-49



<sup>1</sup> According to 2018 Sierra Leone Integrated Household Survey Report

The Private Sector, encompassing pharmaceutical companies, healthcare providers, and businesses, plays a role in ensuring the availability and distribution of contraceptives. Civil Society Organizations, including NGOs and grassroots groups, actively advocate for enhanced SRH services through community engagement and awareness initiatives. Youth-Led Organizations (YLOs) lead the charge in advocating for the sexual and reproductive rights of young individuals, drawing on their distinctive perspectives and experiences to drive positive change. The supply of contraceptives to the last mile for end users access for an improved market performance, and pricing affordability for equitable quality health care services and products are the major constraints to improve youth-driven demand and access for Family Planning (FP) and Sexual Reproductive Health (SRH) products and services in Sierra Leone. Despite the challenges, Sierra Leone presents opportunities for transformative change in the demand of youth FP. The era of digital platforms and mobile technology offers innovative avenues for disseminating information and delivering services. Moreover, the growing influence of YLOs in advocacy and policymaking underscores the potential for harnessing the agency and passion of young individuals to drive family planning service uptakes. The core of this assignment therefore lies in recognizing that successful collaboration and participation by the private sector is essential for tackling the challenges related to youth Family Planning (FP) in Sierra Leone. Through the convergence of stakeholders from diverse sectors, the project endeavours to **cultivate a comprehensive and unified strategy not only to improve the accessibility of high-quality FP services but also to break down obstacles and transform societal perceptions surrounding SRH to enhance the youth FP market ecosystem in Sierra Leone.**

## Assignment Scope

To achieve **Result 1** “Improved market environment for greater private sector participation in the delivery of health products and services” and **Result 2** “Improved equal access to and uptake of high-quality consumer-driven health products, services, and information” of FHM Engage objectives in Sierra Leone, Pathfinder International recruited the services of Sahr Abraham Grass-Sessay of ILEM-Africa Consultancy Firm to serve as their Principal National Consultant to support the scope of work relating to FHM Engage potential intervention in Sierra Leone. The scope-of-work of this assignment has two strands, namely:

- I. **Conduct a Rapid Assessment of Key Market Stakeholders** involved in youth FP markets in Sierra Leone with description of their role and potential contribution. The “Kick-Off” of this assignment in August 2023 commenced with bilateral consultations engaging a wide range of national stakeholders. These meetings provided insight on stakeholders’ **role and their potential contribution to improving youth-driven demand for FP and SRH in Sierra Leone.** In October 2023, ILEM Consultancy Firm facilitated the conduct of Key Informant Interviews conducted by Oliver Le Touze (FHM Engage Consultant). **The outcome of this engagement provided a market intelligence into youth FP and SRH services, and contributed to shaping case studies, curating priority youth profiles used to facilitate groupwork and discussions on the 5Ps Framework (Product, People, Price, Promotion, and Place) for FP/SRH market analysis.**

Source: Pathfinder International | FHM Engage



**2. Illustration of the 5Ps Framework Identifying Market Entry Points for Improving Youth FP Market in Sierra Leone** in a Chart form, four (4) different curated profiles (using local names in Sierra Leone) were used during the Workshop to illustrate 5Ps Framework and for better understanding on how youth access contraceptive products and services in Sierra Leone. This exercise helped participants identify market entry points to improve youth FP Market in the country.

**Persona I: Mohamed Kemokai**

Which contraceptive methods do you think Mohamed would prefer to use? **(Product)**

Method 1	Condom
Method 2	Injection (Depo)
Method 3	Implant

How much do you think Mohamed would prefer to pay for the contraceptive method and service? **(Price)**

	Product Price (NLLe.)	Product Price (NLLe.)
Method 1	1.00	-
Method 2	10.00	10.00
Method 3	10.00	20.00

Which sources do you think Mohamed would prefer to obtain contraceptive methods from? **(Place)**

	Source 1	Source 2	Source 3
Method 1	Government facilities	Drug Store	Pharmacy
Method 2	Government facilities	CHW	Pharmacy
Method 3	Government facilities	Home Service/Trained Nurse	Private Clinic or Hospital

What mediums do you think we can use to reach Mohamed to provide information about contraceptive methods and services? **(Promotion)**

	Source 1	Source 2	Source 3
Method 1	Peer Group	Community Outreach (CHW)	Radio Campaign
Method 2	Community Outreach (CHW)	Community Radio Program	Health Facility Staff
Method 3	Community Outreach (CHW)	Community Radio Program	Health Facility Staff

**Mohamed Kemokai**  
20-29 years old married man living in a rural area in Ngiehun (Kailahun)

**Key Stakeholders**

- Government
- CHWs that provide the service
- Wife because her consent is needed for the adoption of all 3 methods

Source: ILEM-Africa [www.ilem-africa.org](http://www.ilem-africa.org) | October 2023

**Persona II: Aminata Turay**

Which contraceptive methods do you think Aminata would prefer to use? **(Product)**

Method 1	Implant (Captain Band)
Method 2	Pills
Method 3	Injectable

How much do you think Aminata would prefer to pay for the contraceptive method and service? **(Price)**

	Product Price (NLLe.)	Product Price (NLLe.)
Method 1	50.00	20.00
Method 2	15.00	5.00
Method 3	20.00	10.00

Which sources do you think Aminata would prefer to obtain contraceptive methods from? **(Place)**

	Source 1	Source 2	Source 3
Method 1	Government facilities	Private/Public Clinics	Pharmacy
Method 2	Pharmacy	Drug Store	Government Facility
Method 3	Government facilities	Private Clinic	Pharmacy

What mediums do you think we can use to reach Aminata to provide information about contraceptive methods and services? **(Promotion)**

	Source 1	Source 2	Source 3
Method 1	Social Media	Radio Talk Show	Community Engagement
Method 2	Community Engagement	Radio Talk Show	Market Talk Show
Method 3	Peer Group	CHW	Peer Group

**Aminata Turay**  
20-29 years old married woman living in an urban area (Makeni)

**Key Stakeholders**

- Husband
- Health Care Workers
- Peers (Friends)
- CHW

Source: ILEM-Africa [www.ilem-africa.org](http://www.ilem-africa.org) | October 2023



### Persona III: Hawa Samai

Which contraceptive methods do you think Hawa would prefer to use? **(Product)**

<b>Method 1</b>	Jadell (because one can easily forget to take the pill)
<b>Method 2</b>	Oral pills (microgynon)
<b>Method 3</b>	Condom

**Hawa Samai**  
15-19 years old girl living in an urban area (Freetown)



#### Key Stakeholders

- Government
- Development Partners
- Private sector actors like Marie Stopes
- Community Stakeholders like imams, chiefs, journalists, pastors, tribal heads, etc.

How much do you think Hawa would prefer to pay for the contraceptive method and service? **(Price)**

	Product Price (NLe.)	Product Price (NLe.)
<b>Method 1</b>	50.00	50.00
<b>Method 2</b>	25.00	25.00
<b>Method 3</b>	20.00	10.00

Which sources do you think Hawa would prefer to obtain contraceptive methods from? **(Place)**

	Source 1	Source 2	Source 3
<b>Method 1</b>	Government facilities	Private Hospital from a nurse	Licensed Pharmacy
<b>Method 2</b>	Government facilities	Private Hospital from a nurse	Licensed Pharmacy
<b>Method 3</b>	Government facilities	Private Hospital from a nurse	Licensed Pharmacy

What mediums do you think we can use to reach Hawa to provide information about contraceptive methods and services? **(Promotion)**

	Source 1	Source 2	Source 3
<b>Method 1</b>	TV Drama Show	Radio Program Outreach	Social Media Platform
<b>Method 2</b>	TV Drama Show	Radio Program Outreach	Social Media Platform
<b>Method 3</b>	TV Drama Show	Radio Program Outreach	Social Media Platform

Source: ILEM-Africa [www.ilem-africa.org](http://www.ilem-africa.org) | October 2023

### Persona IV: Hawa Sandy

Which contraceptive methods do you think Mahawa would prefer to use? **(Product)**

<b>Method 1</b>	Jadell (implant)
<b>Method 2</b>	Oral Pills (Microgynon)
<b>Method 3</b>	Condom

**Hawa Sandy**  
15-19 years old girl living in an urban area (Freetown)



#### Key Stakeholders

- Parents/Caregivers
- Teachers
- Peer Groups, Adolescents, Youths
- Health Workers, NGOs, CSOs

How much do you think Mahawa would prefer to pay for the contraceptive method and service? **(Price)**

	Product Price (NLe.)	Product Price (NLe.)
<b>Method 1</b>	Free	Free
<b>Method 2</b>	Free	Free
<b>Method 3</b>	Free	Free

Which sources do you think Mahawa would prefer to obtain contraceptive methods from? **(Place)**

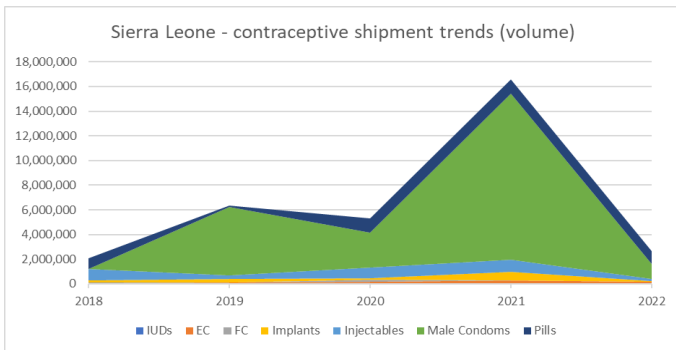
	Source 1	Source 2	Source 3
<b>Method 1</b>	Government facilities	Government facilities	Government facilities
<b>Method 2</b>	Health Facilities Outreach	Drop in center outreach	Condom Promotion
<b>Method 3</b>	Health facility outreach	Health facility outreach	Health facility outreach

What mediums do you think we can use to reach Mahawa to provide information about contraceptive methods and services? **(Promotion)**

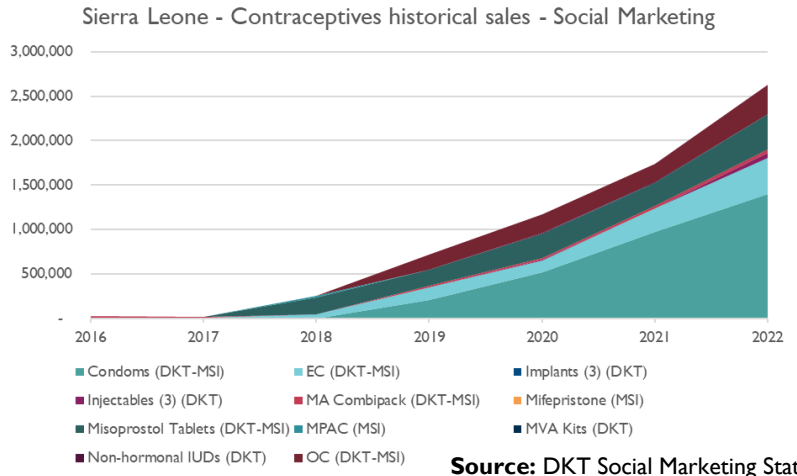
	Source 1	Source 2	Source 3
<b>Method 1</b>	TV, Radio, School Health Clubs, Community Sensitization	Peer group education drama	Social Media Platform (What's App, TikTok)
<b>Method 2</b>	TV, Radio, School Health Clubs	National events and campaigns (AIDS Day)	Comm. Awareness
<b>Method 3</b>	TV, Radio, School Health Clubs	Health education, health	Social media ( Facebook)

Source: ILEM-Africa [www.ilem-africa.org](http://www.ilem-africa.org) | October 2023

At national level, the Charts below outline the Historical Market Trend of Contraceptive; Volume and Stocking of Contraceptives; Kinds of Contraceptives Used; Supply Chain; and Demographic Distribution of End-Users (Adolescents, Youths, and Adults) in Sierra Leone.



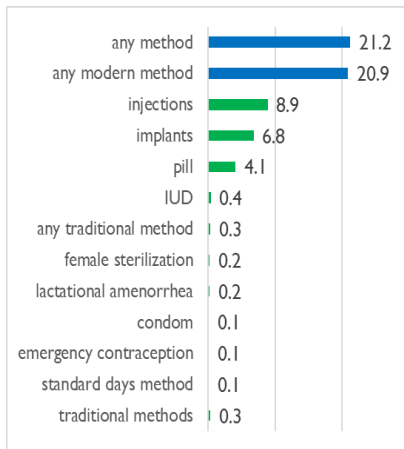
Source: RH supplies database



Source: DKT Social Marketing Statistics

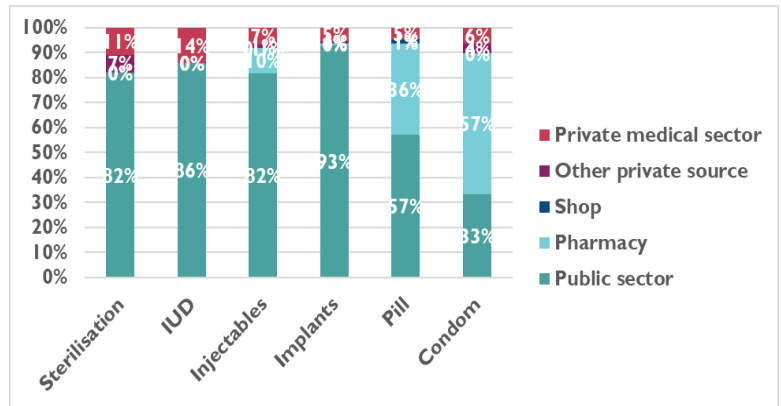
### Contraceptive Use in Sierra Leone

Injectables, implants and pills are the most common methods.

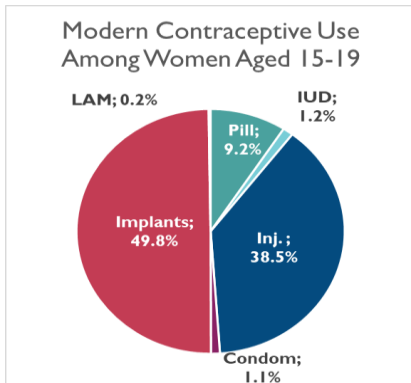


Source: Sierra Leone Demographic and Health Survey (SLDHS 2019)

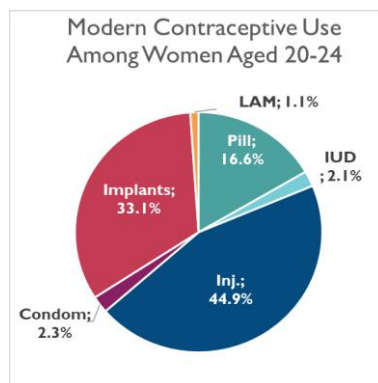
### Source of Supply for Contraceptives



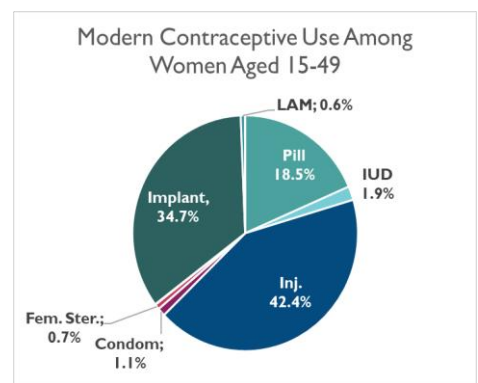
### Contraceptive Methods and Use by Age Group in Sierra Leone



13.9% Unmet need (44,556 WRA)  
21.0% FP use (67,360 WRA)



22.9% Unmet need (100,842 WRA)  
30.2% FP use (132,988 WRA)



20.8% Unmet need (489,852 WRA)  
23.9% FP use (572,733 WRA)

Source: Sierra Leone Demographic and Health Survey (SLDHS 2019)

- 3. Co-Facilitate a National Private-Public Consultative Dialogue** was convened on 26<sup>th</sup> and 27<sup>th</sup> October 2023 in Freetown, Sierra Leone. The Workshop provided **(i)** evidence-based prioritized needs for market analysis of youth FP and SRH; **(ii)** identification of prioritized solutions for addressing these constraints; **(iii)** measuring success related to strengthened youth-driven demand and uptake of FP and SRH services; and **(iv)** description of potential roles of different stakeholders in stewarding market intervention strategy for youth markets.

## Objective of the National Public-Private Dialogue

Cognizant that the overall Scope-of-Work of this assignment builds on the outcome of FHM Engage “Youth FP Rapid Scoping Assessment”, bilateral consultative meetings were held in August-September 2023, followed by facilitation of the conduct of Key Informant Interviews, and the convening of a Public-Private Dialogue, seeking to address a General and Specific Objectives.

### General Objective

The principal aim of this assignment was to “**Describe Market Solutions for Strengthening Youth-Driven Demand for Family Planning by convening a Stakeholders’ Public-Private Dialogue**”. In the framework of the Market Development Approach (MDA) of Frontier Health Market (FHM) Engage seeks to strengthen local health markets through greater private sector participation to address the root causes of market failures on access to and uptake of quality health products and services. The national stakeholders’ dialogue helped achieve the main objective of this assignment. By engaging a wide range of stakeholders whose contribution defined ways to improve services, identify market entry points with recommendations on how and where to intervene to improve market performance. This would strengthen the critical stewardship and functions required to improve youth-driven demand and access for Family Planning (FP) and Sexual Reproductive Health (SRH) products and services in Sierra Leone would be strengthened.

### Specific Objectives

In achieving the overarching objective of this assignment, a set of objectives was achieved to improve FP and SRH services. Each sub-objective offers a targeted and comprehensive approach to addressing the complex challenges faced by the youth population on access to FP/SRH products and services with a **greater emphasis on the pivotal role of the private sector in achieving these goals.**

**Understanding the Full SRH and FP Value Chain** – Participants engaged in in-depth discussions, dissecting the entire spectrum of services, from awareness and education to service delivery and post-care support. By mapping out this comprehensive landscape, attendees gained invaluable insights into the existing infrastructure, enabling them to identify bottlenecks, areas of improvement, and innovative interventions. This understanding of the value chain was essential in devising strategies to ensure seamless access to SRH and FP services for every youth in Sierra Leone.

**Navigating the Licensure Process** – Regulatory experts, policymakers in the interactive national dialogue provided understanding of the licensure process, which equipped participants with the knowledge necessary to establish and operate healthcare facilities that met regulatory benchmarks, ensuring standardized and legally compliant FP and SRH services nationwide.

**Exploring Social and Psychological Norms** – Participants engaged in thought-provoking group work, discussions, and expert-led presentations from each group. Through these interactive sessions, deeply ingrained societal beliefs and attitudes were unearthed, shedding light on the challenges faced by Sierra Leone's youth. By confronting these norms head-on, participants strategized ways to challenge stereotypes, debunk myths, and create culturally sensitive interventions, with the private sector playing a significant role. Hence, paving the way to destigmatized youth friendly FP and SRH services, and providing a gateway to understanding that social and psychological norms influencing market-driven demand for FP and SRH services should no longer be barriers to access healthcare services.

**Fostering Multi-Sectoral Collaboration** – Recognizing the critical role of the private sector to improving the market environment and delivery of health products and services, fostering multi-sectoral collaboration among government bodies, and the private sector inclusive of non-governmental organizations (NGOs), commercial market actors, and professional bodies are essential for the establishment of a private sector led stewardship on access to FP and SRH products and services. By bringing together diverse expertise and perspectives, the National Consultative Dialogue encouraged collaboration across sectors pull resources, share best practices, and amplify the impact of a unified approach in addressing the challenges of youth-driven demand for FP/SRH products and services.

**Empowering Youth Advocacy and Leadership** – The 5Ps Framework Session provided market analysis on Product, People, Price, Promotion, and Place for youth access to FP/SRH products and services. The session equipped participants and youth leaders in the Workshop with advocacy skills, to become champions of change within their communities, with the support and involvement of private enterprises. By nurturing youth advocates, a cadre of informed, and confident youth would be empowered to drive awareness campaigns, challenge societal norms, and actively participate in the decision-making processes regarding their own sexual and reproductive health. The envisaged outcome is to amplify the voices of the youth, ensuring that their perspectives are not only heard but are also acted upon in shaping policies and interventions, with private sector entities playing a supportive role.

**Promoting Data-Driven Decision-Making** – In an era of digital advancement, leveraging data for decision-making is crucial. Data collection, and analysis are useful understand the effectiveness of FP and SRH interventions across Sierra Leone. Promoting a data-driven approach, will provide market insights, track impact of initiatives in real time, identify trends, and adapt their strategies accordingly. Such an approach would create a culture of continuous improvement, where evidence-based practices inform market decisions, ensure effective allocation of resources, guarantee responsive interventions and policy decision-making processes to address the health needs of youth in the country. These sub-objectives and their responsive approaches address the multifaceted challenges of youth-driven demand for FP and SRH services in Sierra Leone, with the private sector playing a pivotal role. Understanding the entire value chain, navigating legal complexities, challenging social norms, fostering collaboration, empowering youth advocacy, and promoting data-driven decision-making, the PPD aimed at “*Strengthening Youth Driven-Demand for Family Planning and Access to Sexual Reproductive Services in Sierra Leone*” empowered stakeholders, including the private sector, to drive meaningful, sustainable change. As participants and advocates embraced these objectives, they embarked on a collective journey, promising a future where the youth of Sierra Leone could access FP and SRH products and services easily with dignity, and knowledge, ensuring their overall well-being and contributing significantly to the nation's development.

## Deliverables

At the end of this assignment, two key deliverables were achieved as aligned with the Scope-of-Work:

- I.1. Deliverable I:** *Inception Report sets the parameter that guides the conduct of the assignment.*  
The Inception Report was developed, submitted, and approved by Pathfinder Intl. in Sept 2023.
- I.2. Deliverable II:** *Outcome Report of the Public Private Dialogue (PPD) outlines the process of convening and conducting the National Stakeholder Dialogue and captures Key Findings/Constraints and Proposed Priority Recommendations on prototype solutions for Strengthening Youth-driven Demand in priority Youth FP Markets in Sierra Leone. This Report constitutes the Outcome Report of the national PPD convened in Freetown, Sierra Leone in October 2023.*

## Overview of the Public-Private Dialogue

### Opening Session

The Founder Managing Director of ILEM-Africa ([www.ilem-africa.org](http://www.ilem-africa.org)) who also doubled as Pathfinder International Principal Consultant in Sierra Leone (Mr. Sahr Abraham Grass-Sessay) gave an overview of the public-private dialogue indicating that it was convened to facilitate open and constructive discussion of key issues on youth family planning and sexual reproductive health. He said that the dialogue for Public-Private-Partnership in addressing the youth-driven demand for family planning services creates an enabling market environment for private sector engagement to support the implementation of government national policy on access to health and family planning services for the youth of Sierra Leone.



Mr. Grass-Sessay said that the diverse group of participants will enrich perspective on policy issues and programme intervention on a theme affecting the wellbeing of the youth of Sierra Leone. He also emphasized the importance of having young peoples' unique insights and perspectives that would inform innovative and youth-friendly approaches to healthcare delivery on FP and SRH. With young people taking into drugs, the level of negligence in planning for their own lives and families is becoming a daunting task, hence **“the need to outline action points that would facilitate the implementation of a national programme to help young people have access to products and services for family planning and contribute to having a well-planned and structured society”** Grass-Sessay stressed.

Before calling on the Hon. Minister of Information and Civic Education, Mr. Sahr Abraham Grass-Sessay encouraged the audience to have expert discussion and actionable recommendations that would break down barriers, combat stigma, and provide young individuals with the tools and knowledge they need to make informed decisions about their sexual and reproductive health.



The “Public-Private Dialogue Strengthening Youth-Driven Demand for Family Planning and Sexual Reproductive Health Services in Sierra Leone”, commenced with Opening Remarks delivered by the Minister of Information and Civic Education (Hon. Chernoh Bah) setting the tone for an enlightening discussion. Hon Bah did not mince words in drawing attention to the importance of such dialogue on youth-driven demand on family planning, saying that sexual reproductive health and rights must be urgently addressed

in Sierra Leone. He expressed appreciation for the timeliness of the consultative dialogue on youth demand for family planning, sexual health, and rights issues. The Honorable Minister and feminist champion on the full rights of girls said there is a need to cultivate the culture for civic engagement and dialogue to find common ground in addressing issues on family planning for youth, and that “NOW” is the time to translate conversation into action. He applauded the President of the Republic of Sierra Leone (Brigadier Retired Julius Maada Bio) for demonstrating a strong commitment to the empowerment of youth and the advancement of women’s rights. The Honorable Minister reminded the audience that national consultative dialogues hinges on the background of many progressive reforms that have taken place in Sierra Leone. **“I happen to believe that conversation on sexual reproductive health and rights should be integral in our civic education conversations,”** the Minister opined.



Mr. Aiah Sosokoeneh, the Senior Health Specialist representing USAID, followed the intervention of the Minister by expressing his reflection on the valuable support of USAID in reinforcing global commitment to improving healthcare outcomes in Sierra Leone. He said that USAID support to Pathfinder through FHM Engage initiative is **“a testament to the collaborative efforts between Sierra Leone and USAID with a keen focus on Youth FP and SRH services”**.



Representing Youth Led Organizations (YLOs), Mr. Nabie Yayah Yansaneh of Youth Entrepreneurship Network highlighted the pivotal role that youth-led organizations play in advancing the cause of Family Planning. He emphasized the vital contribution of YLO in shaping and advocating for policies and services that directly affect their well-being. Mr. Yansaneh committed that **“YLOs are ready to spearhead support healthcare initiative for young people in Sierra Leone”**.



Underpinning the importance of youth engagement in the decision-making processes related to FP and SRH, the Deputy Country Director of UNFPA (Ms. Sibeso Mululuma) underscored the importance of partnership and support to the cause of the youth and highlighted the critical financial and technical assistance provided by her agencies to addressing the healthcare needs of Sierra Leone’s youthful population. She expressed that **“strengthening youth-driven demand for family planning cannot be achieved by one organization but requires the collaborative and concerted effort of all stakeholders in Sierra Leone, especially the private sector.”** She thus encouraged the mixed group of participants to contribute to this noble course.



Representing FHM Engage, Ms. Sonia Surani a Program Manager at Pathfinder International Pakistan, said this national dialogue in Sierra Leone creates a window of opportunity for FHM Engage support to local actors to improve the ability of health markets to meet supply-side capacity gaps and consumer preferences, contributing to equitable provision and access to high-quality family planning (FP) and other health services and products in the health systems. She highlighted the potential programme initiatives on essential healthcare services specifically targeting youth populations that could come out from this public-private dialogue.

Noting that **“Pathfinder International is a renowned global non-profit organization which has been at the forefront of championing sexual and reproductive health and rights for over four decades, ensuring that everyone could access to comprehensive and quality healthcare services with a focus on family planning and sexual reproductive health”**. Ms. Surani played a pivotal role in the successful conclusion of the two-day dialogue by co-facilitating the two-day workshop in Sierra Leone.



The Keynote Address and Closing Statement of the successful 2-day National Dialogue were delivered by Ms. Patricia Bah, the National Coordinator for the Teenage Pregnancy and Child Marriage Secretariate who also doubled as the Adolescent Sexual Reproductive Health Programme Manager within the Ministry of Health. In her statement, she provided a comprehensive overview of Sierra Leone's initiatives, strategies, and commitments in addressing teenage pregnancy, child marriage, and the broader landscape of Adolescent Sexual Reproductive Health including family planning. Her expertise and dedication to the theme were manifested, with her providing valuable insights and a roadmap for the future. She expressed that **“I am grateful to USAID, FHM Engage, Pathfinder International, and ILEM-Africa for the successful event which seeks to compliment the effort of the Government of Sierra Leone in the health sector”**. She thanked participants for their expert contributions and expressed the government’s keen interest in reading and acting on the recommendations from the august gathering seeking to reinforce the significance of addressing pressing Family Planning and SRH challenges confronted by Sierra Leone's youth population.



**Description:** Photo taken after the Opening Session of Statements including government officials, development partners, private sector representatives, youth leaders, expert participants, and co-facilitators. | **Source:** ILEM-Africa [www.ilem-africa.org](http://www.ilem-africa.org) , October. 2023

## Group Work and Thematic Presentations

The agenda(annexed) for the “Public-Private Dialogue Strengthening Youth-Driven Demand for Family Planning and Sexual Reproductive Health Services in Sierra Leone”, offered a comprehensive overview of the meeting and the co-designing session. The 2-day meeting commenced with an opening brief on the structure of the agenda, a tool for mental preparedness, active engagement, and adding meaning to the various planned sessions. **The diagram below represents a schedule of the 2-day meeting.**



## Workshop Expectations

At the outset of the meeting, participants expressed their expectations of what they intend to derive from the 2-day dialogue. There was a use of a **Web-Exercise for self-introduction and expression of expectations**. Below are participants’ aspirations which guided the co-designing sessions.

- What to **gain insights** on how to promote youth ownership and facilitate improved information sharing on Sexual and Reproductive Health (SRH) and Family Planning (FP). Seek strategies to counteract prevailing myths surrounding SRH and FP, combat stigma against SRH workers, maximize the role of the private sector to prevent stockouts, and how to use youth-appropriate media platforms for information dissemination.
- **Know how to increase** FP uptake in urban and especially rural areas to improve youth and adolescent access, enhance community sensitization, ensure product availability, and designing approaches to involve male-gender in FP activities.
- **Understand how to address** issues of confidentiality through open dialogue and explore how to decrease the impact of drug abuse and the rise of teenage pregnancy and early marriage.
- **Decipher how to sustain** and improve access to FP and SRH commodities and services.
- **Gain knowledge** to correct myths and misconceptions about FP among young people. And provide access to and ensure the use of contraceptives among youth and adolescents while building support among community healthcare workers for FP provision for these age groups.



- **Learn how to change** the mindset regarding FP, dispelling the belief that FP is a form of abortion.
- **Learn how to provide** FP commodities to adolescents in hard-to-reach areas, dispelling myths about FP reducing fertility, and addressing economic burdens through collaboration with market-driven providers.
- **Understand how to reduce** the economic burden of FP provision on the Government of Sierra Leone (GoSL) and its alleviation through collaboration with market-driven providers, through the setting of minimum quality standards, clarifying misconceptions about the negative effects of FP on female fertility, and increasing the uptake of male and female condoms.
- **Learn how to empower** young people to make informed choices about their reproductive health, planning for their future (i.e., pursue education, career goals etc.), by engaging in safe and consensual sex. And dissemination strategies of correct information about the health benefits of contraceptives.
- **Know how to provide** a framework for the radical inclusion of private sector providers in FP provision and the networking of institutions in Sexual and Reproductive Health (SRH), by engaging religious leaders, school proprietors, and medical institutions in open discussions about the adoption of FP and SRH for increase uptake, build the capacity of service providers, and foster collaboration.
- **Discover implementation steps** and strategies to improve adolescent and youth access to SRH and FP, address issues such as the lack of information, healthcare provider attitudes, cost, availability, stockouts of commodities, privacy and confidentiality concerns, and inclusion of FP in curriculum.
- **Explore and contribute to discussions** on the active inclusion of private enterprises in the marketing of FP products, by developing effective marketing strategies that resonate with the youth demographic and leverage innovative youth-friendly approaches to promote FP awareness and product availability.



**Description:** Photo taken during the Web-Exercise facilitating self-introduction and expression of expectations, guiding the co-designing sessions. Photos Link <https://photos.app.goo.gl/iNV1ttUYN7bS4rxkZ> | **Source:** ILEM-Africa Oct. 2023

## Key Findings

The insightful-interactive sessions and expert-led presentations provided valuable insights into existing gaps and defined opportunities for programme intervention in the sector. The Workshop underpinned the need for a tailor-designed sex educational campaign targeting youth so that they could make informed FP and SRH decisions. It also underscored the importance of community engagement through private sector inclusion as a crucial element in breaking down barriers, increasing youth access to family planning services, and fostering trust between healthcare providers and the targeted beneficiaries. Below are highlights of the **Findings and a set of Recommended Interventions from the participatory dialogue and co-designing sessions**. If taken into consideration, these would shape any programmatic or advocacy interventions addressing youth-driven demand for FP and SRH services in Sierra Leone.

1. *Youth-Centric Sex Education and Curriculum Development* – The need for a sex educational curriculum, tailored for the youth of Sierra Leone was recognized. The primary objective of the proposed curriculum is to dispel societal and cultural myths and provide accurate information that would inform school going adolescents and youths about their rights and available FP and SRH services.
2. *Licensing Process* – The need to create a Joint Task Force that will consist of government agencies, NGOs, and private enterprises to streamline the licensure process, enhancing the efficiency of establishing FP and SRH facilities was recognized.
3. *Youth Friendly Health Scheme* – The prevailing challenge of accessing FP and SRH services through private healthcare service, which is preferred by youth remains a barrier for many young individuals, especially those from low-income backgrounds to access affordable services. Hence, the need to create synergy between the government and private healthcare providers by adopting youth-friendly pricing structures that would contribute to reducing cost, increasing the access rate of youth to sexual, and reproductive health services, and improving behaviour towards youth seeking services.
4. *Capacity Building for HealthCare Providers* – The significance of continuous training for healthcare providers in providing youth-appropriate services was collectively acknowledged. Building the capacity of healthcare professionals to provide youth appropriate services will help in evolving medical practices and cultural sensitivities relevant to their SRH health needs.
5. *Private-Sector Engagement National Health Service Delivery* – The importance of collaboration between the public and private sectors on health service delivery was emphasised and the need to strengthen both sectors to enhance reach (i.e., delivery of services to the last mile/remote communities) and improve access of SRH and FP products and services.
6. *Monitoring and Evaluation* – Setting-up of a national monitoring and evaluation framework on healthcare products and services is needed to facilitate real-time tracking of the effectiveness and quality of SRH and FP initiatives. A data-driven approach to ensure that interventions are responsive, adaptive, and tailored to the evolving needs of Sierra Leone's youth was embraced as an approach to adopt.

## Recommended Interventions

*Support Youth-Appropriate Platform for Awareness Campaign* – Leverage on youth-friendly media platforms to disseminate accurate and accessible information on FP and SRH, ensuring it resonates effectively with the target audience using local languages. Increase effort on awareness campaigns using social media, community outreach, and peer-led initiatives in local languages to bridge the information gap on FP and SRH services. Increase awareness through targeted campaigns by engaging youth ambassadors and peer-trainers. Such initiatives would facilitate the dissemination of accurate information to vulnerable youth in hard-to-reach communities, help overcome social barriers, address myths and misconceptions, and improve the attitudes of healthcare providers towards youth directed FP and SRH services. Community engagement, and private sector inclusion at local grassroots level, plays a crucial role in breaking down barriers, increasing youth access to family planning, and fostering trust between healthcare providers and vulnerable youth/adolescents in society.

*Establish Private-Sector Led Stewardship* – Establishing a stewardship platform that is inclusive of government, development partner, commercially driven FP market actors, and youth organizations while ensuring it is private-sector led to facilitate diagnosing, dialogue, and co-design interventions to overcome market constraints identified during the national consultative stakeholders' dialogue. Private-Public Partnerships and Public-Private Partnerships would foster collaborative partnerships for co-design and advocacy to break the silence surrounding FP and SRH within religious settings, promoting open and inclusive dialogue by initiating discussions with youth seeking various FP/SRH services, and improving the commodities supply chain.

*Reduce Stock-Out / Improve Commodity Supply* – Implement measures to reduce stock-outs of FP and SRH drugs especially at private sector facilities and pharmacies, by fostering government/public-sector support in strengthening the supply chain (last mile delivery), and supporting supply chain market actors, including SMOs for commodity distribution, marketing, and promotion thereby enabling healthcare providers to have a choice of FP methods for youth, conduct more outreach activities, especially for vulnerable youth and adolescent groups, as youth-driven demand for family planning products contributes to reducing maternal and neonatal mortality, and have a significant impact on the health of babies born to adolescents/youths.

*Develop Standard Operating Procedures (SOPs)* – Collaborating with partners to establish SOPs for service providers on youth-friendly services, ensuring consistency and quality in the delivery of FP and SRH commodities and services nationwide.

*Build Capacity of Healthcare Workers* – Implementing a comprehensive training programme for healthcare workers so that they are empowered with the necessary skills to deliver appropriate information and services to **youth** (aged 18-35) and **adolescents** (aged 13-17). This would include training nurses on adolescent healthcare givers in maintaining privacy and confidentiality and avoiding judgmental attitudes.

*Set-up a Youth-Friendly Medical Scheme* – Setting up a medical scheme that would improve youth-driven demand and address key factors such as accessibility, and affordability of range of FP and SRH products and services by working with the private sector including pharmacies for young people to benefit from available healthcare services.

*Promote Information, Learning, and Outreach on Sexual and Reproductive Health (SRH) Education* – Recognizing the power of knowledge in empowering youth and adolescents to make informed decisions about their Reproductive Health (RH) choices, there is need for the introduction of comprehensive tailor-designed sexual and reproductive health education health educational curriculum. This educational campaign and learning materials would contribute to dispel societal and cultural myths, provide accurate information that would inform school going adolescents and youths about their rights and available/optional FP and SRH services for responsible sexual practices.

*Enact and Implement Policies, Laws, and Regulations* – Spearheading the enactment and implementation of policies, laws, and regulatory provisions on SRH education by stewarding advocacy for a comprehensive and standardized approach in disseminating and making accessible accurate information on FP and SRH through social media, and youth-led platforms. Other advocacy initiatives that can be enacted via the stewardship platform would include capacity building of Services Providers for youth-friendly service provision, strengthening systems of commodity procurement and supply chain, and enhancing youth’s ability to access affordable and equitable quality health care services.

The insights gathered from the 2-days national dialogue reveal several important points about Sierra Leone's youth sexual reproductive health and family planning market. One significant observation is the heavy reliance on donor and development partners. While their contributions are valuable, it is crucial to explore sustainable, locally driven solutions for long-term impact and self-reliance. Hence the private sector pharmacies and drug stores could play a key role in impacting the broader spectrum of availing youth FP and SRH health products by stocking a range of commodities, hence the need to enhance private sector involvement and evaluate their importance for the potential contribution of healthcare commodities across the country.

It should be noted that the licensing for the sales of certified medical drugs including FP and SRH products, the process is relatively straightforward done by the Pharmaceutical Board, which provides an oversight regulatory framework and audit the sales of quality medical drugs in Sierra Leone. This body provides an enabling environment for increased private sector engagement. A major challenge that persists in the SRH and FP market is the frequent stock-outs of essential products. This emphasizes the need for strategic interventions to improve supply chain management and ensure consistent availability of these critical items. Recognizing the significant need gap, particularly on stock-out of healthcare commodities, underpinned the need for private sectors to address this challenge. Empowering and strategically positioning private entities can make a notable contribution to meeting the unmet demand for SRH and FP services due to commodity stock-outs.

Religion and socio-cultural factors have a strong influence on the adoption of SRH and FP practices in Sierra Leone. Any intervention in Sierra Leone therefore must carefully navigate around the prevailing sensitivities and involve key stakeholders who can help overcome existing religious and socio-cultural barriers is crucial for the success of any intervention in the SRH and FP market. Addressing religious and socio-cultural barriers requires collaborative efforts involving influencers, community leaders, and institutions like the Adolescent and Early Child Marriage Secretariat can foster a supportive environment. In our digital age, the potential of social media and digital marketing becomes paramount. Leveraging these platforms can play a crucial role in raising awareness, providing education, and generating demand for SRH and FP products, particularly among the tech-savvy youth demographic. **The Findings and Recommended Call-to-Action Interventions emphasize the importance of an integrated approach to drive positive change in Sierra Leone's SRH and FP landscape. Addressing existing dynamics strategically, it is possible for stakeholders to work toward sustainable solutions that empower individuals and communities to make informed reproductive health choices.**

## Conclusion

As a country, Sierra Leone confronts a significant challenge in providing accessible and comprehensive Sexual and Reproductive Health (SRH) and Family Planning (FP) services, especially for its youth. The National Public-Private Dialogue convened is seen as a well-meaning initiative to bridge gaps in awareness and accessibility, recognizing the intertwined nature of SRH and FP with social, cultural, and economic factors. Focusing on the well-being and empowerment of Sierra Leone the dialogue helps create an enabling environment for public and private sector engagement to support the implementation of government national policy on access to FP and SRH services for the youth of Sierra Leone. With young people taking into drugs, the level of negligence in planning for their own lives and families is becoming a daunting task, hence the need to outline action points that would facilitate the implementation of a national programme to help young people have access to FP and SRH product and services to have a well-planned and structured society. Aligned with the broader initiative of describing market solutions through a Public-Private Stakeholders' Dialogue, the need to enhance stewardship for youth-driven demand for family planning and facilitate market growth was underpinned. The Dialogue enhanced collaboration to overcome challenges and created an opportunity to discuss about implementing a unified strategy to improve accessibility to FP and SRH services and reshape societal/cultural perceptions that would dismantle barriers for an improved ecosystem for positive change in the health sector, and it helped to define the stakeholders' landscape in the sector and their specific responsibilities, namely:

- **Public Sector/Government** shapes policies.
- **Private Sector** ensures availability of contraceptive.
- **Civil Society Organizations** advocate for improved services.
- **Donors and Development Partners** provide crucial programming supports.
- **Youth-led organizations** leverage digital platforms, play a significant role in advocating for reproductive rights and transforming family planning dynamics in Sierra Leone.

Private sector representatives in the workshop shared expectation to reduce government reliance on free commodity supplies for Family Planning. The discussion **explores sustainable models where the private sector can play a more active role in supplying, distributing, and marketing FP products. This shift from a dependence on free commodities is a means to promote economic sustainability, increase efficiency, and foster collaboration between the public and private sectors in addressing the FP needs of the community.** Hence the private sector involvement is key to enhancing the reach and effectiveness of FP marketing efforts in Sierra Leone. The Public-Private Dialogue and Co-Design Workshop underpinned the need to cultivate the culture for civic engagement and dialogue to find common ground in addressing issues on family planning for youth. The national dialogue is aligned with the broader initiative of describing market solutions and emphasized that now is the time to translate conversation into action. The outcome of the workshop bridged gaps in awareness and accessibility, recognized that there is an intertwined need to dismantle barriers and reshape societal perceptions. It also enhanced the need for stewardship for youth-driven demand for FP/SRH to facilitate market growth through private sector engagement. The need for awareness campaigns using social media, community outreach, and peer-led initiatives in local languages to bridge the information gap was emphasized. Hence, the need for the inclusion of sex education/like skill-based education in curriculum for the Education Ministry to consider. Such initiatives would facilitate the dissemination of accurate information to vulnerable youth in hard-to-reach communities ensuring school-going youths are well informed about available commodities and services, their rights, and the importance of seeking timely FP and SRH services through a competent service provider. The challenge of accessing FP and SRH services through private healthcare service providers remains a cost barrier for many young individuals, especially those from low-income backgrounds. Hence, the need to create synergy between the government and private healthcare providers by adopting youth-friendly pricing structures that would contribute to reducing cost, increasing access rate of youth to sexual and reproductive health services, and improving health care-seeking behavior of youth in Sierra Leone. It was also suggested to set up a financial scheme for young people to have affordable access to health services. **The Key Findings and Recommended Actions from the dialogue has the propensity to unify a national strategy on youth access to FP and SRH. Knowledge shared, partnerships formed, and insights gained during the workshop could be used to transform the overall FP/SRH services in Sierra Leone.**

## Vote of Thanks

The 2-days “Public-Private Dialogue on Youth-Driven Demand for FP and SRH Services in Sierra Leone” provided an opportunity for participants to discuss issues related to limited finance to access health services coupled with cultural, social, and religious interpretations, making access to FP and SRH services difficult for youth in Sierra Leone. The Vote-of-Thanks on behalf of the participants was given by the Country Manager of DKT Pharmaceutical, a Private Sector representative, he re-echoed the need for “the government of Sierra Leone needs to work with the private sector payers to effectively improve the health outcomes of youth in Sierra Leone.” At the end of this National Public-Private Dialogue participants, co-facilitators from Pathfinder and ILEM-Africa took a group photo immortalizing the august gathering.



**Description:** Photo taken at end of the 2-days dialogue and co-designing sessions. | **Source:** ILEM-Africa October 2023 **Outcome Report** | “Strengthening Public-Private Dialogue for Youth-Driven Demand for FP and SRH Services in Sierra Leone”

# Annex – I: PPD Workshop Agenda



## PUBLIC PRIVATE DIALOGUE & CO-DESIGN WORKSHOP Strengthening Youth Driven-Demand for Family Planning in Sierra Leone

26th - 27th October 2023  
Radisson Blu Mammy Yoko Hotel, Freetown-Sierra Leone

### WORKSHOP AGENDA









AGENDA DAY 1					
S/No	From	To	Activity	Session facilitator	
	9:00 AM	10:00 AM	Meet & Greet Breakfast and Registration		
1	10:00 AM	11:30 AM	Opening Session		
	10:00 AM	10:10 AM	Call to order & Setting the Scene	Mr. Abraham Grass-Sessay, Pathfinder   FHM Engage Consultant	
	10:10 AM	10:20 AM	Opening Remarks	Mr. Chernoh Bah, Minister of Civic Education	
	10:20 AM	10:30 AM	Welcome Note	Mr. Aiah Sosokoeneh, Senior Health Specialist USAID	
	10:30 AM	10:40 AM	Statement of Youth Representative	Mr. Nabie Yayah Yansaneh, Youth Entrepreneurship Network	
	10:40 AM	10:50 AM	Statement from SRH/FP Development Partner	Ms. Sibeso Mululuma, UNFPA Deputy Country Director	
	10:50 AM	11:00 AM	Statement On Behalf of Pathinder Intl. FHM Engage	Ms. Sonia Surani, Program Manager FHM Engage Pakistan	
	10:50 AM	11:15 AM	Keynote Address	Ms. Patricia Bah, MoH Programme Manager-Adolescent SRH	
	11:15 AM	11:30 AM	Group Photo & Tea Break		
2	11:30 AM	1:00 PM	Participant Introductions & Reflections		
	11:30 AM	11:45 AM	Workshop Objectives and Agenda Overview	Mr. Abraham Grass-Sessay, Pathfinder   FHM Engage Consultant	
	11:45 AM	12:15 PM	A Web of Expertise: Participants Introductions	Ms. Sonia Surani, Program Manager FHM Engage Pakistan	
	12:15 PM	12:30 PM	Formation of Break-out Groups	Mr. Abraham Grass-Sessay & ILEM-Africa Team	
	12:30 PM	1:00 PM	Reflections on Youth Access to Contraceptives - open discussion	Mr. Abraham Grass-Sessay & ILEM-Africa Team	
	1:00 PM	2:00 PM	Lunch		
3	2:00 AM	2:45 PM	Discovery & Review of Evidence		
	2:00 AM	2:45 PM	Youth Market Analysis & Diagnosis (by Olivier LeTouze)	Ms. Sonia Surani, Program Manager FHM Engage Pakistan	
	2:45 PM	3:15 PM	Questions, Reflections, & Discussion	Mr. Abraham Grass-Sessay, Pathfinder   FHM Engage Consultant	
	3:15 PM	3:45 PM	Networking		
4	3:45 PM	5:00 PM	Co-design 1: Visioning & Prioritization		
	3:45 PM	4:00 PM	Instructions for Breakout Session and Group Work	Mr. Abraham Grass-Sessay, Pathfinder   FHM Engage Consultant	
	4:00 PM	5:00 PM	Group 1: Enabling policy environment for youth FP	Group Facilitator (Sonia)	
			Group 2: Provision of Quality FP Supply for Youth	Group Facilitator (Edward)	
			Group 3: Demand for Youth FP services (Development Partners)	Group Facilitator (Abraham)	
		Group 4: Demand for Youth FP services (YLO)	Group Facilitator (Alfred)		
			*Continues to Day 2		
	5:00 PM		End of Day 1		
AGENDA DAY 2					
S/No	From	To	Activity	Session facilitator	
	9:00 AM	10:00 AM	Meet & Greet Breakfast and Registration		
5	10:00 AM	1:00 PM	Co-design 1: Visioning & Prioritization (continued from Day 1)		
	10:00 AM	11:00 AM	Group Work: Review and Revision of group work outputs	Mr. Abraham Grass-Sessay & ILEM-Africa Team	
	11:00 AM	11:30 AM	Plenary presentation Group 1	Designated Group Rapporteur	
	11:30 AM	12:00 PM	Plenary presentation Group 2	Designated Group Rapporteur	
	12:00 PM	12:30 PM	Plenary presentation Group 3	Designated Group Rapporteur	
	12:30 PM	1:00 PM	Plenary presentation Group 4	Designated Group Rapporteur	
	1:00 PM	2:00 PM	Lunch		
6	2:00 PM	4:00 PM	Co-design 2: Identifying Market Entry Points for Improving Youth FP Markets		
	2:00 PM	2:15 PM	Formation of Break-out Groups and 3 Youth Segment Profiles	Mr. Abraham Grass-Sessay & ILEM-Africa Team	
	2:15 PM	2:30 PM	Instructions for Breakout Session and Group Work	Ms. Sonia Surani, Program Manager FHM Engage Pakistan	
	2:30 PM	3:15 PM	Group Work - 5 P's Framework	Group Work Session	
	3:15 PM	3:45 PM	Group presentation in Plenary	Designated Group Rapporteur	
	3:45 PM	4:00 PM	Tea Break and Networking		
7	4:00 PM	5:00 PM	Closing Session		
	4:00 PM	4:10 PM	Closing Remarks	Ms. Sonia Surani, Program Manager FHM Engage Pakistan	
	4:10 PM	4:20 PM		Mr. Abraham Grass-Sessay, Pathfinder   FHM Engage Consultant	
	4:20 PM	4:30 PM		Ms. Patricia Bah, MoH Programme Manager-Adolescent SRH	
	4:30 PM	4:40 PM	Vote-of-Thanks	Mr. Michael Enema, DKT Intl. Country Representative	
	4:40 PM	4:50 PM	Next Steps Defined	Mr. Abraham Grass-Sessay, Pathfinder   FHM Engage Consultant	
	5:00 PM		End of Day 2		













## Annex – II: Participant List

N°	Name	Designation	Organization	Email Contacts	Sector			
					G	D	DP	PS
1.	Christiana K. Fayia	Port Loko School Health Focal	Port Loko – District Health Management Team (DHMT)	<a href="mailto:Christianakal2@gmail.com">Christianakal2@gmail.com</a>	<input type="checkbox"/>			
2.	Elfrida H. Fomba	School Health Focal	Kailahun – DHMT	<a href="mailto:Elfridak2010@gmail.com">Elfridak2010@gmail.com</a>	<input type="checkbox"/>			
3.	Mohamed Kargbo	Rep. SHF Person	Bombali - DHMT	<a href="mailto:m.kargbo672@gmail.com">m.kargbo672@gmail.com</a>	<input type="checkbox"/>			
4.	Nanah Kamara	Falaba School Health Focal	Falaba - DHMT		<input type="checkbox"/>			
5.	Alhaji Kalil Yillah	Program Officer	Youth Entrepreneurship Network	<a href="mailto:Alhaji.kalil3@gmail.com">Alhaji.kalil3@gmail.com</a>			<input type="checkbox"/>	
6.	Isatu Bangura	School Hall Focal	Bonth – DHMT	<a href="mailto:Banguraisatu22@gmail.com">Banguraisatu22@gmail.com</a>	<input type="checkbox"/>			
7.	Rebecca Memsie Koroma	Youth Commissioner (Rep.)	National Youth Commission	<a href="mailto:beckiememzo@gmail.com">beckiememzo@gmail.com</a>	<input type="checkbox"/>			
8.	Fayia Foray	Service Marketing Manager	Marie Stopes Sierra Leone	<a href="mailto:Fayia.foray@mariestopes.org.sl">Fayia.foray@mariestopes.org.sl</a>			<input type="checkbox"/>	
9.	Mabel M. King	Adolescent School Health FP	Pujehun – DHMT	<a href="mailto:Kingmabel1970@gmail.com">Kingmabel1970@gmail.com</a>	<input type="checkbox"/>			
10.	James Riak Mathiang	Executive Director	GOAL Sierra Leone	<a href="mailto:jriak@sl.goal.ie">jriak@sl.goal.ie</a>			<input type="checkbox"/>	
11.	Mohamed Eisa	Health Coordinator	GOAL Sierra Leone	<a href="mailto:meise@sl.goal.ie">meise@sl.goal.ie</a>			<input type="checkbox"/>	
12.	Isatu Bosco Kamara	DHMT School Focal	Karene – DHMT	<a href="mailto:Satbossca8@gmail.com">Satbossca8@gmail.com</a>	<input type="checkbox"/>			



13.	Ann-Marie M. Korjia	School Health Focal	Kono – DHMT	<a href="mailto:akorjia@gmail.com">akorjia@gmail.com</a>				
14.	Sibeso Mululuma	Deputy Country Rep.	UNFPA	<a href="mailto:mululuma@unfpa.org">mululuma@unfpa.org</a>				
15.	Gamachis G. Shogo	Technical Specialist, RHCS	UNFPA	<a href="mailto:shogo@unfpa.org">shogo@unfpa.org</a>				
16.	Musa Kawusu-Kebbay	YIP Consultant	UNFPA	<a href="mailto:Kawusu-kebbay@unfpa.org">Kawusu-kebbay@unfpa.org</a>				
17.	Patricia Bah	National Coordinator TP	Ministry of Health (MoH)	<a href="mailto:Patmatu69@yahoo.com">Patmatu69@yahoo.com</a>				
18.	Dr. Patrick E. Turay	Medical Superintendent	Holy Spirit Hospital, Makeni	<a href="mailto:patrickturay@yahoo.com">patrickturay@yahoo.com</a>				
19.	Cecilia J. Sorie	District Health Superintendent	Moyamba – MoH	<a href="mailto:Cecilia17894@gmail.com">Cecilia17894@gmail.com</a>				
20.	Hannah A. Lahai	Ministry of Gender	Assistant Director	<a href="mailto:hannahalahai@gmail.com">hannahalahai@gmail.com</a>				
21.	Adama Conteh	SPHS Focal Person	Ministry of Health	<a href="mailto:Mambuadama93@gmail.com">Mambuadama93@gmail.com</a>				
22.	Juliana Konteh	Director	Women in Crisis Movement	<a href="mailto:womenincrisissl@gmail.com">womenincrisissl@gmail.com</a>				
23.	Abass Sheku Fowai	School Adolescent Health FP	Kambia – DHMT	<a href="mailto:abassshekufowai@gmail.com">abassshekufowai@gmail.com</a>				
24.	Dr. Sitta Kamara	Principal Pharmacist	Medical Stores	<a href="mailto:Sittakamara904@yahoo.com">Sittakamara904@yahoo.com</a>				
25.	Regina M. Kenneh	District Health Superintendent	Western Area Urban – DHMT	<a href="mailto:Reginkay2018@gmail.com">Reginkay2018@gmail.com</a>				
26.	Dr. Mallam Sannoh	Medical Superintendent	Serabu – MoH	<a href="mailto:Mallamsannoh504@gmail.com">Mallamsannoh504@gmail.com</a>				
27.	Abubakarr Jalloh	Peoples Pharmacy		<a href="mailto:jallohbakas@gmail.com">jallohbakas@gmail.com</a>				
28.	Rose Ann Kanu	Gender Advisor	Concern Worldwide S/Leone	<a href="mailto:Rose.kanu@concern.net">Rose.kanu@concern.net</a>				
29.	Karen Vandy	Adolescent Focal, Bo	Bo – MoH	<a href="mailto:Karenavandy15@gmail.com">Karenavandy15@gmail.com</a>				

30.	Musu R. Cole	Senior Nurse Specialist	RCHD MOH	<a href="mailto:Musucde67@yahoo.com">Musucde67@yahoo.com</a>				
31.	Nabie Yayah Yansaneh	Country Manager	Youth Entrepreneurship Network					
32.	Musu R. Cole	Senior Nurse Specialist	RCHD – MoH	<a href="mailto:Musucde67@yahoo.com">Musucde67@yahoo.com</a>				
33.	Adama Sam	Focal SHRH	Tonkolili – DHMT	<a href="mailto:adamasamol@gmail.com">adamasamol@gmail.com</a>				
34.	Aiah Sosokoeneh	Senior Health Specialist	USAID Sierra Leone	<a href="mailto:asosokoneh@usaid.gov">asosokoneh@usaid.gov</a>				
35.	Umaru Bah	Writer	MOILE	<a href="mailto:moile@gov.sl">moile@gov.sl</a>				
36.	Sayoh Augustine Francis	Program Manager	Restless Dev. Sierra Leone	<a href="mailto:francis@restlessdevelopment.org">francis@restlessdevelopment.org</a>				
37.	Suluku Siliaman Dumbuya	Camera Operator	SLBC-TV	<a href="mailto:ssdumbuya@gmail.com">ssdumbuya@gmail.com</a>				
38.	Patrick Sallia	Producer/Editor	SLBC-TV	<a href="mailto:debplatsall@gmail.com">debplatsall@gmail.com</a>				
39.	James Kamara-Manneh	Editor	A-Z Newspaper	<a href="mailto:Jkmanneh2020@gmail.com">Jkmanneh2020@gmail.com</a>				
40.	Michael Enema	Country Manager	DKT International	<a href="mailto:enema@dktSierraleone.org">enema@dktSierraleone.org</a>				
41.	Mahmoud Silla	Managing Director	Nature Newspaper					
42.	Hannah A. Lahai	Assistant Director	Ministry of Gender	<a href="mailto:Hannahlahai5@gmail.com">Hannahlahai5@gmail.com</a>				
43.	Dr. Tom Sesay	Director for SRH and FP	MoH	<a href="mailto:tomesay@gmail.com">tomesay@gmail.com</a>				
44.	Hon Chernor Bah	Minister	Ministry of Info. & Civic Edu.	<a href="mailto:minister@moice.gov.sl">minister@moice.gov.sl</a>				
45.	Sonia Surani	Program Manager	Pathfinder International   FHM Engage	<a href="mailto:ssurani@pathfinder.org">ssurani@pathfinder.org</a>				

46.	Sahr Abraham Grass-Sessay	Pathfinder Intl.  FHM Engage Consultant, & Founder Managing Director	ILEM-Africa Consultancy Firm	<a href="mailto:abraham@ilem-africa.org">abraham@ilem-africa.org</a>				
47.	Edward Benya	Senior Programme Manager	ILEM-Africa Consultancy Firm	<a href="mailto:benya@ilem-africa.org">benya@ilem-africa.org</a>				
48.	Alfred Jusu	Operations Manager	ILEM-Africa Consultancy Firm	<a href="mailto:alfred@ilem-africa.org">alfred@ilem-africa.org</a>				
49.	Sarah Kamara	HR/Admin. Manager	ILEM-Africa Consultancy Firm	<a href="mailto:sarah@ilem-africa.org">sarah@ilem-africa.org</a>				
50.	Musa Turay	Programme Officer	ILEM-Africa Consultancy Firm	<a href="mailto:musa@ilem-africa.org">musa@ilem-africa.org</a>				
51.	Dominic Sam	Office Assistant	ILEM-Africa Consultancy Firm	<a href="mailto:dominic@ilem-africa.org">dominic@ilem-africa.org</a>				

**Sector Categorization of Participants:**  Government-G  Donor-D  Development Partner-DP  Private Sector-PS

## Annex – III: Co-Designing, Visioning, and Prioritization Session

Group -1 Enabling Policy Environment for Youth FP					
N <sup>o</sup>	Issue	Current Status	Vision for 2030	Priority Gaps and Challenges	Priority Recommendations for Achieving Vision 2030
1.	<b>Stewardship</b>	<ul style="list-style-type: none"> <li>- GoSL providing services but not adequate.</li> <li>- Some of the private sector institutions providing services but it is a choice e.g., MSSSL, PPSL</li> </ul>	Hoping that the government to provide the one percent for FP for youth which was a commitment made by government	<ul style="list-style-type: none"> <li>- Availability of FP services for 24 hours</li> <li>- Access hard-to-reach areas.</li> <li>- Commodities stockout.</li> <li>- Limited choice.</li> <li>- Attitude of the services providers.</li> <li>- Capacity of health care workers.</li> <li>- Attrition of the trained and skilled personnel.</li> <li>- In adequate AYFHS</li> </ul>	<ul style="list-style-type: none"> <li>• To ensure there are trained HCWs, equipped and have infrastructure.</li> <li>• Engage local Gov to lead partnership to raise awareness about family planning.</li> <li>• Ensure the FP commodities are budgeted.</li> <li>• Improve the management of the available FP commodities. Intra-facility family planning commodities adjustment.</li> </ul>
2.	<b>Rules and Regulations</b>	<ul style="list-style-type: none"> <li>- Available but need an update.</li> </ul>	Private and public sectors have clear guidance for the provision of family planning services	<ul style="list-style-type: none"> <li>- No rule for private facilities to provide FP services.</li> <li>- Gap in information sharing (report by private sector).</li> <li>- FP services provided by untrained personnel</li> </ul>	<ul style="list-style-type: none"> <li>• Dialogue with the private sector to include FP services - Dialogue with the Private sector to share data.</li> <li>• Regulate and build the capacity of all the FP service providers.</li> </ul>
3.	<b>Policies</b>	<ul style="list-style-type: none"> <li>- Available but needs to be reviewed regularly e.g., School health policy.</li> <li>- Comprehensive sex Edu.</li> <li>- SRH bill (pipeline)</li> <li>- CHWs refilling the supplies</li> </ul>	HCWs allowed to provide FP services to adolescents without consent, also guide the activities of health care workers.	<ul style="list-style-type: none"> <li>- SRH bill still pending.</li> <li>- The clarity around the consent</li> <li>- Lack of action no available policies</li> </ul>	<ul style="list-style-type: none"> <li>• Strongly advocate for approval of Sexual and reproductive health rights bill to be passed as law.</li> <li>• Update and popularize the policies.</li> </ul>
4.	<b>Financing</b>	<ul style="list-style-type: none"> <li>- Inadequate financing for the provision of FP services.</li> <li>- Depends more on development partners</li> </ul>	GoSL should be able to reach the targeted 1% commitment to family planning.	<ul style="list-style-type: none"> <li>- Slow clearance process during the importation of the family planning commodities. Not enough funding for training of the service providers especially the private sector.</li> </ul>	<ul style="list-style-type: none"> <li>• Make use of the duty waiver and ensure it is clearer.</li> <li>• Include the FP commodities in the annual budget of GoSL</li> </ul>

## Group -2 Provision of Quality FP Supply for Youth

N <sup>o</sup>	Issue	Current Status	Vision for 2030	Priority Gaps and Challenges	Priority Recommendations for Achieving Vision 2030
1.	<b>Stewardship</b>	<ul style="list-style-type: none"> <li>- GoSL providing services but not adequate.</li> <li>- Some of the private sector institutions providing services but it is a choice e.g., MSSSL, PPSL</li> </ul>	Hoping that the government to provide the one percent for FP for youth which was a commitment made by government	<ul style="list-style-type: none"> <li>- Availability of FP services for 24 hours</li> <li>- Access hard-to-reach areas.</li> <li>- Commodities stockout.</li> <li>- Limited choice.</li> <li>- Attitude of the services providers.</li> <li>- Capacity of health care workers.</li> <li>- Attrition of the trained and skilled personnel.</li> <li>- In adequate AYFHS</li> </ul>	<ul style="list-style-type: none"> <li>• To ensure there are trained HCWs, equipped and have infrastructure.</li> <li>• Engage local Gov to lead partnership to raise awareness about family planning.</li> <li>• Ensure the FP commodities are budgeted.</li> <li>• Improve the management of the available FP commodities. Intra-facility family planning commodities adjustment.</li> </ul>
2.	<b>Rules and Regulations</b>	<ul style="list-style-type: none"> <li>- Available but need an update.</li> </ul>	Private and public sectors have clear guidance for the provision of family planning services.	<ul style="list-style-type: none"> <li>- No rule for private facilities to provide FP services.</li> <li>- Gap in information sharing (report by private sector).</li> <li>- FP services provided by untrained personnel.</li> </ul>	<ul style="list-style-type: none"> <li>• Dialogue with the private sector to include FP services - Dialogue with the Private sector to share data.</li> <li>• Regulate and build the capacity of all the FP service providers.</li> </ul>
3.	<b>Policies</b>	<ul style="list-style-type: none"> <li>- Available but needs to be reviewed regularly e.g., School health policy.</li> <li>- Comprehensive sex Edu.</li> <li>- SRH bill (pipeline)</li> <li>- CHWs refilling the supplies</li> </ul>	HCWs allowed to provide FP services to adolescents without consent, also guide the activities of health care workers.	<ul style="list-style-type: none"> <li>- SRH bill still pending.</li> <li>- The clarity around the consent.</li> <li>- Lack of action no available policies.</li> </ul>	<ul style="list-style-type: none"> <li>• Strongly advocate for approval of Sexual and reproductive health rights bill to be passed as law.</li> <li>• Update and popularize the policies.</li> </ul>
4.	<b>Financing</b>	<ul style="list-style-type: none"> <li>- Inadequate financing for the provision of FP services.</li> <li>- Depends more on development partners</li> </ul>	GoSL should be able to reach the targeted 1% commitment to family planning.	<ul style="list-style-type: none"> <li>- Slow clearance process during the importation of the family planning commodities.</li> <li>- Not enough funding for training of the service providers especially the private sector.</li> </ul>	<ul style="list-style-type: none"> <li>• Make use of the duty waiver and ensure it is clearer.</li> <li>• Include the FP commodities in the annual budget of GoSL.</li> </ul>

### Group -3 Youth access/demand and preferences for FP Services (Development Partners Perspective)

N <sup>o</sup>	Issue	Current Status	Vision for 2030	Priority Gaps and Challenges	Priority Recommendations for Achieving Vision 2030
1.	<b>Youth Perception Regarding FP</b>	<ul style="list-style-type: none"> <li>- Youth often value privacy and confidentiality when seeking family planning services.</li> <li>- Every member of the community, regardless of age, gender, socioeconomic status, or location, has equal access to accurate, reliable, and culturally sensitive information.</li> </ul>	All young people, regardless of gender, socioeconomic background, or geographic location, have equal and unhindered access to comprehensive family planning services, including education, counseling, and a variety of contraceptive methods.	<ul style="list-style-type: none"> <li>- Widespread misinformation and myths about family planning methods, their effectiveness, and potential side effects can confuse young individuals.</li> <li>- Stigma surrounding discussions about sex, contraception, and family planning can inhibit open dialogue. Sociocultural norms and conservative attitudes within families and communities often discourage young people from accessing services.</li> </ul>	<ul style="list-style-type: none"> <li>• Reconcile societal stigmas and misconceptions by promoting open community dialogues and awareness campaigns.</li> <li>• Reconcile the lack of youth-friendly healthcare services by establishing dedicated clinics and hotlines that provide confidential and non-judgmental family planning consultations.</li> </ul>
2.	<b>Community-based Access to Information</b>	<ul style="list-style-type: none"> <li>- Misinformation.</li> </ul>	Every member of the community, regardless of age, gender, socioeconomic status, or location, has equal access to accurate, reliable, and culturally sensitive information.	<ul style="list-style-type: none"> <li>- Information available might not always be culturally relevant or context specific. Content needs to be tailored to local customs, traditions, and specific community needs to ensure relevance and acceptance.</li> <li>- Communities with low literacy rates face challenges in accessing written information. Visual and interactive mediums might be more effective, but such resources are not always readily available or accessible.</li> </ul>	<ul style="list-style-type: none"> <li>• Implement digital literacy programs in communities, especially targeting women and marginalized groups, to enhance their skills in accessing online family planning resources.</li> <li>• Involve young people as peer educators to disseminate FP to their peers. Youth-led initiatives, (workshops, awareness etc.) can effectively reach their age group and address specific concerns.</li> </ul>
3.	<b>Digital Access to Information</b>	<ul style="list-style-type: none"> <li>- Low</li> </ul>	Picture a world where digital platforms, mobile apps, and online resources provide reliable and culturally sensitive family planning information in multiple languages.	<ul style="list-style-type: none"> <li>- Low Internet Network / Connectivity Constraint.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop user-friendly websites and mobile applications with intuitive interfaces to quickly find relevant information about various family planning methods.</li> <li>• Include Q&amp;A section to debunking common myths and misconceptions about FP with evidence-based explanations.</li> </ul>
4.	<b>Youth Inclusion in Decision Making</b>	<ul style="list-style-type: none"> <li>- Low</li> </ul>	Involving more youth in decision-making.	<ul style="list-style-type: none"> <li>- Unfriendly youth decision-making space.</li> </ul>	<ul style="list-style-type: none"> <li>• Making youth the lead in family planning initiatives.</li> </ul>

## Group -4 Youth access/demand and preferences for FP Services (Youth Perspective)

N <sup>o</sup>	Issue	Current Status	Vision for 2030	Priority Gaps and Challenges	Priority Recommendations for Achieving Vision 2030
1.	<b>Youth Perception Regarding FP</b>	<ul style="list-style-type: none"> <li>- GoSL providers are discriminatory and do not maintain confidentiality.</li> <li>- Implant is better than other methods.</li> <li>- Hard to access the healthcare facilities.</li> <li>- Concerns about the side effects of certain methods.</li> <li>- Cost attached to services.</li> <li>- Condoms limit the experience – flesh to flesh is natural and best</li> </ul>	<ul style="list-style-type: none"> <li>o Improved access to quality FP services.</li> <li>o Increase in the uptake of FP services, reduction in teenage pregnancy, and avert maternal mortality.</li> <li>o Reduction or eradication of FP commodity stockout at facilities.</li> <li>o Increase in condom usage especially for sexually active people.</li> </ul>	<ul style="list-style-type: none"> <li>- Inadequate trained FP healthcare staff</li> <li>- Bad road networks.</li> <li>- Poor community acceptance.</li> <li>- Poor/low acceptability of condom use.</li> <li>- High rate of unplanned sexual intercourse</li> </ul>	<ul style="list-style-type: none"> <li>• Regular and adequate supply of certified commodities.</li> <li>• Ensure FP services are affordable by youth.</li> <li>• Continuous training, mentoring, and monitoring of healthcare providers.</li> <li>• Training of healthcare workers on youth friendly services</li> <li>• Enhance government/public and private sector partnerships.</li> </ul>
2.	<b>Community-based Access to Information</b>	<ul style="list-style-type: none"> <li>- Youth would like more information. There is information but not adequate.</li> <li>- Perception that information is available to few people.</li> </ul>	<ul style="list-style-type: none"> <li>o There should be readily available correct FP information.</li> <li>o Increase engagement with community <b>gatekeepers</b>.</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of <b>standardised</b> FP information across platforms.</li> <li>- Low knowledge in different community approaches that align with community traditions and customs.</li> </ul>	<ul style="list-style-type: none"> <li>• Develop a <b>standardised</b> community approaches that align with community traditions and customs.</li> </ul>
3.	<b>Digital Access to Information</b>	<ul style="list-style-type: none"> <li>- Limited access to digital information.</li> </ul>	Increase the access to youth friendly SRH & FP information.	<ul style="list-style-type: none"> <li>- Costly internet data.</li> <li>- Misinformation on social media</li> <li>- Bad mobile network in some localities</li> </ul>	<ul style="list-style-type: none"> <li>• Build the capacity of social media influencers and journalist on how to share youth friendly FP and SRH messages.</li> <li>• Use messaging platform like mobile SMS and social media platforms to send FP messages.</li> </ul>
4.	<b>Youth Inclusion in Decision Making</b>	<ul style="list-style-type: none"> <li>- Limited inclusion in decision-making</li> </ul>	Youth inclusion in strategic decision making across levels.	<ul style="list-style-type: none"> <li>- Lack of decision-making authority across the different platforms.</li> <li>- Lack of recognition by elders and authorities.</li> </ul>	<ul style="list-style-type: none"> <li>• Building the capacity of youth to be readily prepared for decision-making and involve them in decision-making process.</li> </ul>

---

### About FHM Engage

Frontier Health Markets (FHM) Engage is a five-year cooperative agreement (7200AA21CA00027) funded by the United States Agency for International Development. We work to improve the market environment for greater private sector participation in the delivery of health products and services and to improve equal access to and uptake of high-quality consumer driven health products, services, and information.

### About ILEM-Africa Consultancy Firm

The Institute of Leadership, Energy, Environment, and Management–**ILEM-Africa**, is an “Africa-centric Consultancy Firm”, established in 2018 on the premise to leverage inter-continental technical assistance to government entities, development partners and private sector businesses. ILEM has an ecosystem of experts with work experience in 21 African countries to-date conducting **a)** Analytic Research through data collection and analysis of surveys, **b)** Feasibility Assessments, **c)** Formulating Responsive Policies and Programmes , **d)** Coordinating in the implementation of Tailored-Designed Development Initiatives, and **e)** Providing Technical Assistance in the formation of Institutions, and **f)** Building capacity through training and mentorship support services, seeking to address national, sub-regional and continent-wide development challenges.

ILEM’s technical support services span from one-man mission to engaging the services of a collegiate ecosystem of experts in providing specialized assistance on **IV Thematic Outlays**. This Technical Assistance (TA) support service to Pathfinder International FHM Engage, falls within the ambit of ILEM’s Thematic Outlay I “**Institutional Capacity Building Support**” which includes *Facilitating Policy Dialogue, Stakeholders’ Engagements and Reporting*.

© ILEM-Africa Consultancy Firm 2022 [www.ilem-africa.org](http://www.ilem-africa.org) All rights reserved.

Address: 17a Bolling Street, Kingtom, Freetown, Sierra Leone | West Africa

