

# Adolescents' Access to Reproductive Health and Family Planning Services in Dakar (Senegal)

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## ABSTRACT

This paper analyses the issue of adolescents' access to family planning services and information on reproductive health. The data used in this paper are a part of a broader study conducted in 1995 in Dakar (Senegal) by the Committee for Studies on Women, Family and Environment in Africa (COSWFEVA/CEFFEVA) and Family Health International. The findings present information on adolescents' perceptions of premarital sexual activity and contraceptive use and the different types of barriers to access to family planning, using data obtained primarily from focus group discussions with adolescents 16 to 20 years old and a mystery client study. In this approach, 12 of the adolescents participating in the focus group discussions visited clinics as clients and requested contraceptive methods or information. The results indicate that adolescents did not approve of premarital sexual relations, were less likely to approve of contraceptive use by adolescents than by married men and women, and felt embarrassed to go to the services. They were also disappointed by the providers' reception and response to their needs. The content of the counselling offered by the providers was moralistic, encouraging girls to abstain from having sexual intercourse until marriage. The discussions of the findings related adolescents' and providers' attitudes to the socio-cultural context in which adolescent sexuality takes place. In this context, sexuality is closely linked to marriage and childbearing, which affects the impact of classical programs on adolescent health. Alternative solutions such as the life skills development approach could be promoted in order to reach both in-school and out-of-school adolescents. (*Afr J Reprod Health* 1997;1(2):15–25)

## RÉSUMÉ

L'accès aux services de planification familiale et à l'information sur la santé reproductive par les adolescent(e)s de Dakar (Sénégal)

Cet article analyse la question de l'accès aux services de planification familiale et à l'information sur la santé reproductive des adolescent(e)s. Les données présentées dans cet article constituent une partie d'une étude de plus grande envergure conduite en 1995 à Dakar (Sénégal) par le Comité d'Etudes sur les Femmes, la Famille et l'Environnement en Afrique (CEFFEVA) et Family Health International. Ces données proviennent des discussions de groupe avec des adolescent(e)s âgé(e)s de 16 à 20 ans, et d'une enquête menée par des client(e)s anonymes. Les résultats portent sur la perception que les adolescent(e)s ont des rapports sexuels avant le mariage, l'utilisation des méthodes contraceptives et les barrières à l'accès aux services et aux informations.

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KEY WORDS: *Adolescents, family planning, contraceptive use, reproductive health, Dakar, Senegal*

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respect to the African context, community-based programmes directed to both adults and adolescents will have the advantage of involving adults and reaching out-of-school teenagers.<sup>13,28,45</sup> Given the influential role that parents can play in adolescents' reproductive health, programmes that include parents for the promotion of intergenerational communication within families will be more likely to have a greater and more sustainable impact.<sup>46</sup>

Findings from our mystery client study, complemented by focus group discussions, indicate that social norms continue to degrade premarital sexuality, making it difficult for young unmarried people to access family planning services without embarrassment. If they do visit such services, they are inadequately counselled and do not receive the services they request. Current FLE in the school systems of Dakar appear to be reaching only a minority of students, after the average age of sexual initiation. New, validated education and service interventions are needed for adolescents. A review of international experience suggests that a life skills development approach may hold promise for positively affecting adolescent behaviour and delaying sexual initiation, and such approaches deserve consideration in Senegal and internationally.

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