



GENDER IN GEOPOLITICS INSTITUTE

State of play of the rights and the sexual health of adolescents in West and Central Africa



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List of acronyms

AIDS : Acquired immune deficiency syndrome

ASRH : Adolescent sexual and reproductive health

CAP : Cairo Action Programme

CAR : Central African Republic

CSE : Comprehensive sexuality education

DRC : Democratic Republic of the Congo

FGM : Female genital mutilation

FP : Family planning

GBV : Gender based violence

GDP : Gross domestic product

GPI : Gender Parity Index

HDI : Human development index

HIV : Human immunodeficiency viruses

ICPD : International Conference on Population and Development

LBQSWW : Lesbians, bisexual women, queer women and women who have sex with women

MMR : Maternal mortality ratio

SIGI : Social Institutions & Gender Index

SRGBV : School-related gender-based violence

SRH : Sexual and Reproductive Health

SRHR : Sexual and Reproductive Health and Rights

STDs : Sexually transmitted diseases

STIs : Sexually transmitted infections

UN Women : United Nations entity for gender equality and the empowerment of women

WCA : West and Central Africa

WHO : World Health Organization

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In a continent beset by underdevelopment, women are the first victims. They face multifaceted discriminations even though gender disparities cost approximately 95 billion dollars each year on average to Sub-Saharan Africa¹. Inside this first marginalized group is a population that is all the more vulnerable: adolescents (between the ages of 10 and 19 according to the WHO) and young women under 24. In West and Central Africa (WCA), more than 64% of the population is below the age of 24 and more than 50% of these young people are girls². They represent a considerable resource for the development of the region, but they will only be able to fulfill their potential when investments will be made for their education, health, competences, and empowerment. This will require the respect of their Sexual and Reproductive Health and Rights (SRHR).

The SRHR are a set of rights that guarantee to women, regardless of their age, the access to a number of services regarding the most intimate and fundamental aspects of their life : their bodies, their sexuality, their health, their partners, whether to marry or not, to have children or not, etc. Established in 1994 by a twenty-year action plan adopted by 179 countries during the International Conference on Population and Development (ICPD) in Cairo, the SRHR gather the following thematics : family planning, child marriage, early pregnancies, comprehensive sexuality education, sexually transmitted infections and diseases, gender-based violence, female genital mutilations, access to abortion, sexual violence committed in wartime, the rights of LGBTIQI+, etc. Despite these international agreements, adolescents of West and Central Africa are facing multifaceted sociocultural, religious, legal, economic, or political obstacles that are limiting their sexual and reproductive rights.

To begin with, we will talk about the access to family planning and contraceptive services. While among 15-to 19-years olds 52% of girls have already had sexual relations, 95% of them admit not having used contraceptive methods³. On average, only 14,7% of young women between the ages of 15 and 24 (married or in a relationship) or their sexual partner use a contraceptive method⁴. Unmet needs for contraception are linked to several factors such as obstacles relating to the social and institutional environment, ignorance, the quality of services or financial considerations⁵.

In addition, low contraceptive prevalence rates expose adolescents to sexually transmitted infections (STIs), as well as sexually transmitted diseases (STDs). In 2015, 66% of new reported cases of the human immunodeficiency virus (HIV) that occurred among young people of the region concerned girls⁶. This important number is explained by the fact that only 27% of adolescents and

¹ UNDP. (2018). Human development indices and indicators – Stastitcal update. New-York. p.29.

² UNFPA. (2018). Adolescents and Youth Report : West and Central Africa.

³ .Darroch, J.E., Woog, V., Bankole, A, & Ashford, L.S. (2016). “Adding it up : costs and benefits of meeting the contraceptive needs of adolescents”. New York : Institut Guttmacher

⁴ UNFPA. (2018). Adolescents and Youth Report : West and Central Africa.

⁵ Equilibres & Populations. (2016). Fact sheet – Les obstacles à l'accès à la planification familiale chez les adolescentes. Paris.

⁶ UNAIDS. (2016). Prevention Gap Report.

25% of adolescents between the ages of 15 and 24 have a good knowledge of HIV prevention⁷, 43% of adolescents from West and Central Africa use condoms as a contraceptive method and only 18% of girls and 10% of boys between the ages of 15 and 24 say that they have already done a screening⁸.

Beyond STIs and STDs, the limited access to family planning services can lead to unplanned adolescent pregnancies. In WCA, around one in three adolescents under the age of 19 years has already given birth⁹ and the birth rate among adolescents is 129 live births per 1,000 adolescents, compared with a global average of 52 live births¹⁰. Yet, early pregnancies have severe consequences for the physical and emotional health of young girls as the complications linked to the pregnancy remain the main cause of death among adolescents¹¹. As well as deaths, the risks of maternal disability are higher among adolescent mothers than among women aged 20 and more¹². Many are those who suffer from obstetric fistula for example. This incontinence caused by a prolonged labor during delivery, occurs when the mother's body is not mature enough to give birth: 65% of women suffering from obstetric fistula married off early¹³. Early pregnancies can also have a repercussion on the education of girls as only six countries show a transition rate from primary to secondary school greater than 90% for girls.

Abortion is often considered as an answer to unwanted early pregnancies. Between 2010 and 2014, the abortion rate¹⁴ was 31% in West Africa and 35% in Central Africa¹⁵. However, abortion is subject to such strict conditions that illegal abortion remain the norm, with all the consequences on the adolescents' health that it involves.

⁷ Priscilla Idele, Amaya Gillespie, Tyler Porth, MSPH, Chiho Suzuki, Mary Mahy, Susan Kasedde, & Chewe Luo. (2014). *Epidemiology of HIV and AIDS Among Adolescents : Current Status, Inequities, and Data Gaps*. Philadelphia : Lippincott Williams & Wilkins.

⁸ UNFPA. (2018). *Adolescents and Youth Report: West and Central Africa*

⁹ UNFPA. (2018). *Adolescents and Youth Report: West and Central Africa*

¹⁰ UNFPA. (2018). *Adolescents and Youth Report: West and Central Africa*

¹¹ UNICEF. (s.d.). Child survival. Collected on Unicef.org : <https://www.unicef.org/wca/fr/la-survie-et-le-d%C3%A9veloppement-du-jeune-enfant>

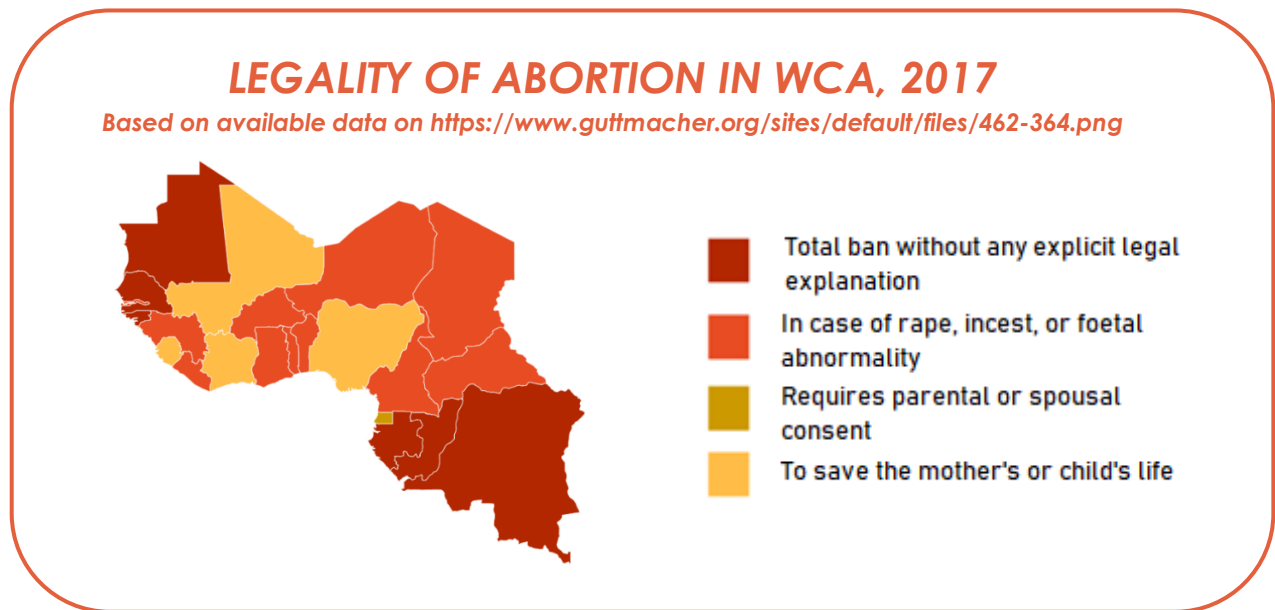
¹² UNFPA. (2018). *Adolescents and Youth Report: West and Central Africa*

¹³ UNFPA. (2018). *Adolescents and Youth Report: West and Central Africa*

¹⁴ That is to say the number of abortions per 1,000 women between the ages of 15 and 44.

¹⁵ Guttmacher Institute. (2018, March). *Abortion in Africa – Incidence and trends*. Collected on Guttmacher.

In this regard, the Maternal mortality ratio (MMR) of adolescents in Sub-Saharan Africa, three times higher than the global MMR, is specifically linked to illegal abortions¹⁶.



Even though the links between early pregnancies and child marriage tend to become weaker, adolescents' maternity remain closely linked to their marital status. Indeed, in developing countries, nine births out of ten of adolescent mothers occur within a marriage or a union¹⁷. As a subject of transactional negotiations between families, adolescents are often married off for economic reasons, as if to avoid paying the costs of education or to complete the household income for example.

In West and Central Africa, about four young girls out of ten were married off before the age of 18 and among them, one out of three was married off before the age of 15¹⁸, representing the highest child marriage rate in the world. These early unions constitute a violation of girls' rights to health, education, and future prospects as they expose them to sexual, physical, psychological, and emotional violence. Moreover, due to the age difference and power dynamics that go along, young girls often struggle to make known their wishes or to negotiate safe consensual sexual relations¹⁹. They can also be victims of honor killings, rapes, or abuse when domestic and conjugal requirements are not respected. Early marriage also encourages the deschoolization of adolescents

¹⁶ UNFPA. (2018). Adolescents and Youth Report: West and Central Africa.

¹⁷ Walker, J.-A. (2013). Why ending child marriage needs between Ending Child to be an educational goal : the case for improved coordination Marriage and Girls' Education Movements in West Africa. Center for Universal Education.

¹⁸ UNICEF. (2017). UNICEF, category data and analysis: Achieving a Future Without Child Marriage, Focus on West and Central Africa. New York.

¹⁹ UNFPA. (2018). Adolescents and Youth Report : West and Central Africa.

who, once married, are considered as being supported by their husbands and therefore no longer need education²⁰.

The violence of gender relations can manifest itself even more concretely, especially through – sometimes sexual – gender-based violence (GBV). Sexual violence consists of any sexual act, or attempt to initiate a sexual act, using coercion, force, threat, or surprise. In the seven countries of WCA for which data are available, 8% of young girls between the ages of 15 and 19, and 9% of young women between the ages of 20 and 24 have been subjected to sexual violence²¹.

The GBV also affect adolescents depending on their marital and economic status, their level of education, and their geographical situation. For example, in Central African Republic and in the Lake Chad basin, the generalized violence and armed conflicts are characterized by severe human rights violations that has massively led to internal or cross-border displacements. Yet, adolescents are particularly affected by these conflicts, especially because they are victims of rape used as a weapon of war or used as forced labor by the warring factions, that encourage a significantly higher risk of sexual violence on adolescents²². If violence in times of conflict are difficult to quantify, it is worth mentioning the case of the DRC and Liberia : the government of the DRC referred to 40 rapes per day in the East of the country in 2018 and between 2011 and 2012, 83% of victims of sexual violence during the civil war in Liberia were below the age of 17²³.

Gender-based violence also refers to Female Genital Mutilations (FGM). FGM consist of any harmful intervention practiced on female genital organs for non-medical purposes: partial or full removal of the clitoris, the labia minora, narrowing of the vaginal orifice, scarification, etc²⁴. FGM are sometimes a part of traditional ceremonies such as rites of passage from childhood to adolescence. Adolescents living in rural areas as well as the ones that did not receive any education are more exposed to FGM. Also, young girls married before the age of 18 are more subjected to FGM, excision being considered as a mean to control the adolescents' sexuality and therefore a prerequisite for marriage in Nigeria or in Guinea for example²⁵. If the incidence tends to decrease in West and Central Africa, the region still has countries where these practices are particularly widespread such as Guinea, Sierra Leone, Mali, or Gambia.

In this regard, more than one adolescent out of three between the ages of 15 and 19 declare to have been subjected to a FGM in WCA²⁶. The consequences for the health of the adolescents are harmful and sometimes lasting: pain, hemorrhages, pelvic infections, urinary retention, sterility,

²⁰ UNICEF. (2015). Child marriage, adolescent pregnancy, and family formation in West and Central Africa. Dakar.

²¹ UNFPA. (2018). Adolescents and Youth Report: West and Central Africa.

²² Ibid.

²³ BBC. (2013, April 10). Guerre : les enfants victimes de viols. Collected on bbc.com : https://www.bbc.com/afrique/monde/2013/04/130410_viols_enfants_g8

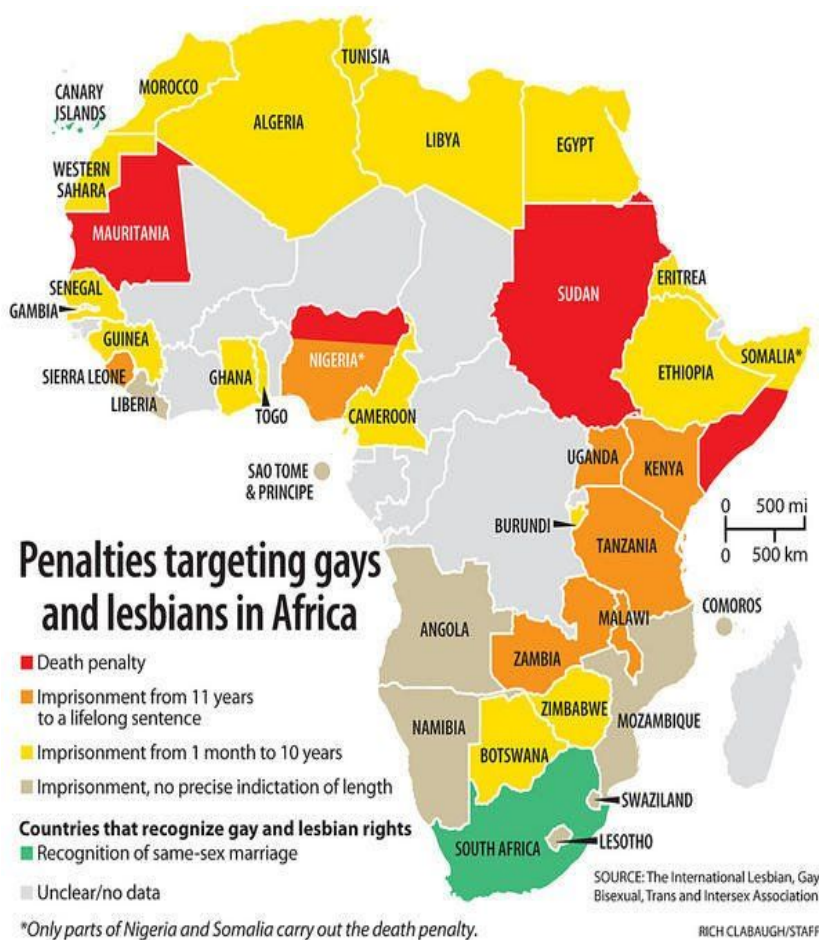
²⁴ Armelle Andro & Marie Lesclingand. (2017). Les mutilations génitales féminines dans le monde. Paris.

²⁵ UNFPA. (2018). Adolescents and Youth Report: West and Central Africa.

²⁶ UNFPA. (2018). Adolescents and Youth Report: West and Central Africa.

affected sexuality, risks of complications during pregnancy and delivery, etc. without forgetting to mention the potential psychological trauma²⁷.

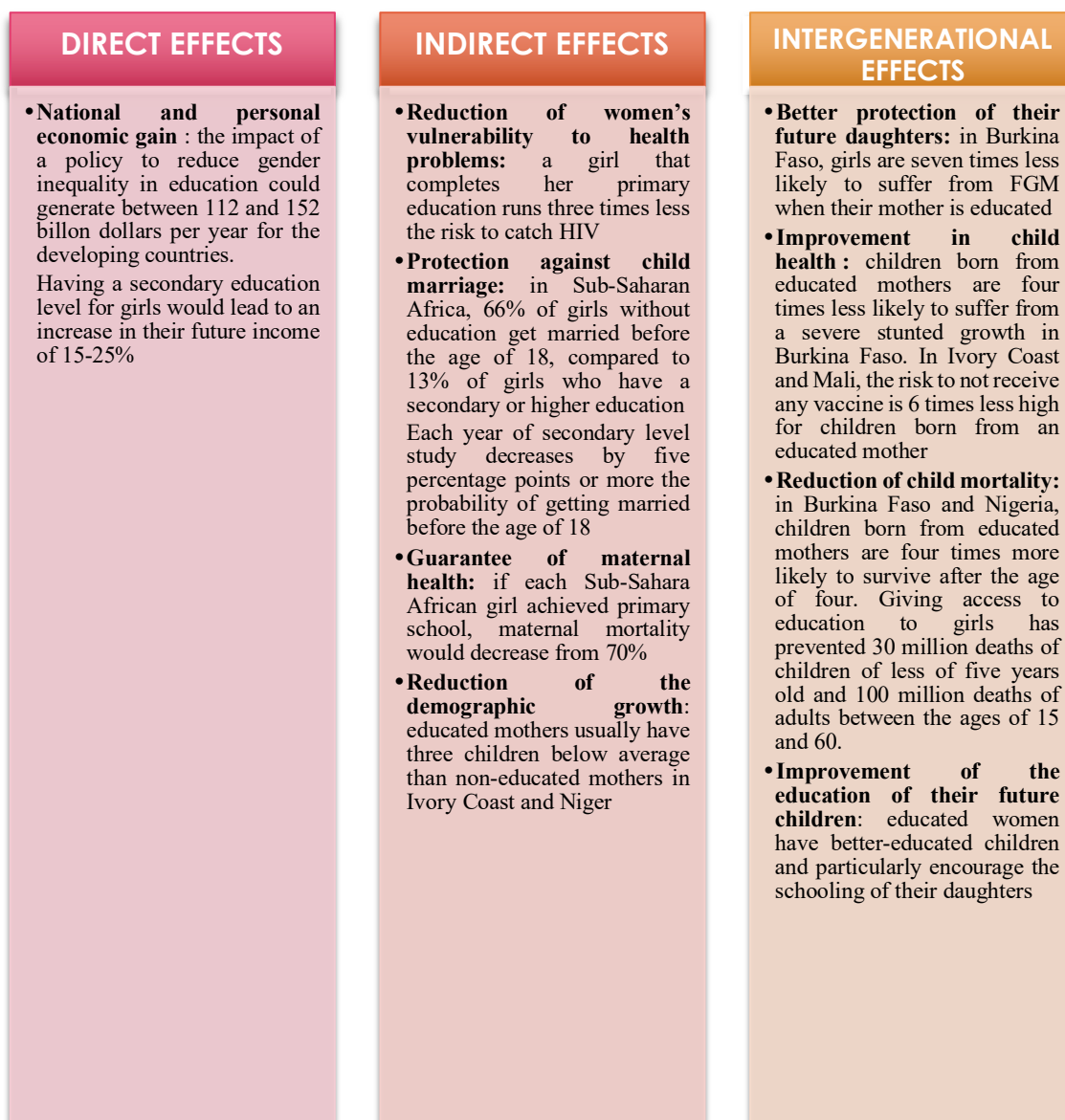
Gender-based violence can especially affect young girls with a sexual orientation or a gender identity considered a minority in society. Lesbians, bisexuals, queer women, women who have sex with women (LBQWSW) for example. Even though sexual and reproductive health and rights guarantee the rights of everyone to dispose of one's body and sexuality, homosexuality, bisexuality, or transsexuality questions are rarely considered in the programs, particularly in WCA. Yet, the young girls that face these issues are just as vulnerable than the others – if not more – and have specific health-related needs. Indeed, given that it is already difficult for heterosexual adolescents to find information regarding their sexual health, it is even more complicated for LBQWSW exposed to heteronormative health services. Beyond problems relating to the sexual health of LBQWSW, the latter are particularly prone to emotional abuse, generally from family members²⁸. These violences are all the more legitimated by the fact that the majority of countries of WCA have a legal framework quite hostile to lesbians, gays, bisexuals, transexuals, queers and intersexes communities (LGBTQI+).



²⁷ OMS. (2018, January 31). Female Genital Mutilation. Collected on who.int : <https://www.who.int/fr/news-room/fact-sheet/detail/female-genital-mutilation>

²⁸ Ibid.

Lastly, access to education of adolescents is also to consider as a young girl that goes to school is less vulnerable than another. In the report Promoting girls' right to learn in West and Central Africa, the SDG4²⁹ WCA Regional Coordination Group indicates that the education of girls lays the foundation for sustainable socio-economic development, provides girls with competences in terms of employment and innovation, and allows them to contribute in a significant way to societal progress³⁰ :



²⁹ Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.

³⁰ Regional coordination group on the Sustainable Development Goal n°4 in West and Central Africa. (2017). Promote the right of girls to education in West and Central Africa.

Source : UNFPA. (2018). *Adolescents and Youth Report: West and Central Africa*.

Yet, the obstacles to education for girls are many: poverty, norms, traditions and sexist behaviors limiting their opportunities, FGM, child marriages, distance from school, safety concerns, absence of non-mixed and private bathrooms, School-related gender-based violence (SRGBV), etc³¹. Consequently, in WCA, girls represent 52% of all the out-of-school adolescents. If parity is relatively well respected in primary school, the number of girls in secondary school tends to decrease as the Gender Parity Index (GPI) – that is to say the ratio of the enrolment rate for girls compared to boys – diminishes towards 0,82 in junior high school, before diminishing towards 0,73 in senior high school³². The higher the level of education gets, the higher the gap between girls and boys continues to grow. However, Sao Tome and Principe, Congo Brazzaville, Gabon, Ghana, and Nigeria seem to be exceptions in the region as the participation rate in secondary education for girls is higher than the one for boys³³.

Nonetheless, beyond the participation of girls to the educational system, we have yet to give them access to information regarding their sexual and reproductive rights. Indeed, Comprehensive sexuality education (CSE) contribute to the reduction of disinformation on Sexual and Reproductive Health (SRH) by promoting a responsible sexuality that participates to the increase of the rates of use of a mean of contraception or protection against STDs/STIs³⁴. Ivory Coast, Togo, Benin, Senegal, and Burkina Faso have taken measures to promote CSE, but the integration of the thematic modules in the program of the remaining subjects remain in practice subjected to the capacity and the will of teachers, which lack resources to do so³⁵.

In 2013, the population between the ages of 15 and 24 in Africa reached 200 million people, and this number is expected to double by 2045³⁶. In this regard, the African youth is being identified as a time bomb or an opportunity to seize for development. However, if adolescents make up a future resource, they are first and foremost actors and actresses of the present moment. This is why it is necessary to guarantee the full realization of their potential, and especially the one of female adolescents, who are particularly vulnerable to discriminations and violences that infringe their rights, threaten their health and deny their physical integrity.

³¹ WAAW Foundation & UNICEF. (2015). All in School; Tolulope Owajoba, January 2015 : gender discrimination

³² UNESCO Institute for Statistics (2015). UNICEF: Regional report of West and Central Africa – all children at school; global initiative targeting out-of-school children. UNESCO.

³³ UNFPA. (2018). *Adolescents and Youth Report: West and Central Africa*.

³⁴ UNFPA WCARO. (2018). *Comprehensive sexuality education: Evidence and promising practices in West and Central Africa*. UNFPA.

³⁵ Equilibres & Populations. (2017). *L'éducation complète à la sexualité : les grands enjeux en Afrique de l'Ouest francophone*.

³⁶ African Development Bank, Organisation for Economic Co-operation and Development, United Nations Development Programme and United Nations Economic Commission for Africa. (2012). *African Economic Outlook*.