

Sexual & reproductive health & rights for adolescent girls

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McGranahan et al. *Reprod Health* (2021) 18:125
<https://doi.org/10.1186/s12978-021-01174-z>

Reproductive Health

RESEARCH

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Realising sexual and reproductive health and rights of adolescent girls and young women living in slums in Uganda: a qualitative study

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Abstract

Background: Sexual and reproductive health and rights are critical entitlements best supported through human rights-based approaches empowering rights-holders to claim their rights and duty bearers to fulfil their obligations. Implementing these requires information on the current needs and challenges faced by those seeking to claim their sexual and reproductive health and rights. We aimed to identify the underlying factors influencing the realisation of sexual and reproductive health and rights for adolescent girls and young women living in Ugandan slums by: (1) exploring the role of relevant service providers and stakeholders; and (2) uncovering knowledge and gaps in protecting adolescent girls' and young women's sexual and reproductive health and rights.

Methods: Qualitative data were collected through focus groups and interviews focused on current knowledge, behaviours and attitudes towards sexual and reproductive health and rights among adolescent girls and young women, service providers and stakeholders. Data were analysed thematically using NVivo software. Ten in-depth interviews were conducted with key informants; two focus groups were held with adolescent girls and young women living in two slums in Uganda (21 participants in total); and three focus groups were held with community leaders, service providers, teachers and parents (30 participants in total).

Results: Adolescent girls and young women lacked information regarding their sexual health, services available, and redress mechanisms for rights violations. Formal sources of information were frequently inaccessible. Family members were sometimes the source of rights violations, and informal methods of redressing rights were often sought. Stigma and fear were common features both in healthcare and in the pursuit of formal justice, with duty-bearers habitually breaking confidentiality. Education and training were the predominant suggestions offered for change.

Conclusions: Adolescent girls and young women continue to face obstacles in achieving their full sexual and reproductive health and rights. Targeted interventions for the realisation of adolescent girls' and young women's sexual and reproductive health and rights can address underlying causes and positively shift attitudes to promote health.

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Year of Publication: 2021

Access Resource Here: