

Seychelles National Assembly

Committee for Communicable diseases,
HIV/AIDS and SRHR Progress Report.

NEAPACOH 2018 Post-Meeting Commitments

Increase our HIV/AIDS awareness and prevention programmes as well as SRHR interventions and parliamentary support.

Keep a good rapport between the National Assembly and other stakeholders and consolidate efforts on progress made on Maternal Care and family planning through budgetary allocation, support and oversight.

Initiate relevant Bills and Motions, especially on the disparity in existing legislation governing SRHR issues.

Major achievements of the 6th National Assembly's Committee on communicable diseases, HIV/AIDS & SRHR

1. Change of name and TOR.

‘Communicable diseases’ was added to the name of the committee so that the committee could extend its mandate to cover issues related to other communicable diseases such as Tuberculosis. This was a due to a request from SADC PF.

The Committee's term of reference stipulates that the Committee examines issues relating to HIV/AIDS and SRHR such as;

- Advise and disseminate information to Members of the National Assembly for possible legislative enactment in a manner that human rights and dignity of all citizens are safe guarded
- Establish effective communication with local and international stake holders
- And ensure that legislation on HIV/AIDS and SRHR are in conformity to other Southern African Development countries.

2. Termly meeting with Ministry of Health and CSOs to address adolescent sexual and reproductive health issues as well as to edit the health policy on the matter.

- Discussion on several United Nation Conventions and Protocols which have been ratified by the National Assembly,
- Eg UN inter' convention on the Rights of the Child 1989,
- UN inter' conference on pop'n and Development 1994.
- UN World Programme for Youth 2000,
- Abuja Declaration,
- Maputo plan of action 2006 and NEAPACOH Kampala resolutions (2018.)

These UN conventions and other protocols have been domesticated to recognize the right of adolescents and youths to enjoy a high quality health care and well being. They also formed the basis framework for discussions which lead/guide the edition of the National Policy on SRHR issues.

3. Work on **National policy** engulfed the following ;-

a) Revisiting stats/data / demographic distribution to ascertain the status of sexual and reproductive health care.

Eg. Data on proportion of woman receiving prenatal care, maternal mortality ratio per capita, birth by age groups (**focus on challenges such as teenage pregnancies, heroin dependent mothers, ante-natal clinic non-attenders**), condom distributions/risk reduction and contraceptive use.

b) Discussion on adolescent sexual and reproductive health clinics (**focus on screening tests for adolescents/ mobile clinics/ public hearing/ Family planning education, roles of peer educators in addressing their own needs**).

c) Carry out cost-analysis to address the reproductive health needs as oppose to non-action to serve as indicators for budgetary requirements and youth investments.

d) Discussion and public hearings on barriers to reproductive health services accessed by adolescents and youths.

e) Include Family Planning and Personal and Sexual Education (PSE) in the National Curriculum. Continuity of schooling after given birth.

Consolidation of previous work on HIV/AIDS & SRHR issues .

- Appointment of Focal Point for SRHR and HIV/AIDS Project.
- Technical Working Group Constituted in Seychelles.
- Capacity Building for Technical Working Group.
- Establishment of Parliamentary Committee on SRHR and HIV/AIDS.
- Communication and Consultation with Stakeholders.
- Strategic Session by the Technical Working Group.
- Technical Working Group - Urgent Questions and Motions to assist Members of parliament in their oversight of HIV/AIDS and SRHR issues at the National Level.
- Strategic Session for women Parliamentarians on HIV/AIDS and SRHR.
- Sensitization workshop on the HIV/AIDS and SRHR and Governance Project to members of the National Assembly.
- Participation in the presentation of a study by the Ministry of Health based on Pregnant women's satisfaction and Expectation of Maternity Health Services in Seychelles.
- Women Parliamentarians discussion with the President and the designated minister about issues affecting women and young girls.
- National Action Plan - Seychelles HIV/AIDS and SRHR removing Legal Barriers and stigmatisation.
- Regional Consultative meetings.
- Dialogue on Sex Workers in Seychelles
- Public Hearings and Sexual Reproductive Health Awareness Campaign
- Advocacy on SRHR issues with key populations including the prison.
- Awareness and education on SRHR issues for students/ adolescents.

Milestones

- ❖ This platform has enabled us to take into account the challenges parliamentarians face in reference to resources, capacity building, political will, cultural and religious beliefs and their impacts on Family Planning programmes and Sexual Reproductive Health.
- ❖ Seychelles shares some similarly issues in programme implementation as other member states present.
- ❖ We participated in forums where the existing Adolescents sexual and reproductive Health policy was re-edited.
- Increase our HIV/AIDS awareness and prevention programmes as well as SRHR interventions and parliamentary support.
- Maintain and consolidate the good rapport between the National Assembly and other stakeholders/ CSOs/ Ministry of Health as well as improved collaboration on Maternal Care and Family Planning through budgetary allocation (gearing towards Abuja Declaration), support and oversight.
- Initiate relevant Bills and champion Motions, especially on the disparity in existing legislation governing SRHR issues and harm reduction especially among key population.

Challenges

1. Convention of the **E**limination of all forms of **D**iscrimination **A**gainst **W**oman (CEDAW) country report claims that Adolescent reproductive health remains an issue requiring urgent attention.
2. Early sexual debut indicated by the result in Child Well-being Survey (CWS) showed that 46% of boys and girls aged 12 to 19 have had sexual intercourse.
3. Increase in Teenage pregnancies/ unprotected sex among teenagers
4. Non-compliance to early antenatal registration.
5. Increase in approved cases of TOPs (Termination of Pregnancies)/ CEDAW reported on persistent growth in number of unsafe abortions/backstreet abortion.
6. Increase in heroin dependent mothers as a key pop'n'.
7. Increase in STIs although low prevalence in the general pop'n'
8. Increase in school 'drop outs' despite young mothers can return to school.
9. Increase in Sexual abuse indicated by (CWS) 26% of girls have had reported having sex with someone older than them and majority reported that it was unprotected sex.
10. Transmission of HIV by sharing infected drug needles among drug users and prison inmates. / No harm reduction programme for inmates.
11. Unprotected sex among inmates.
12. Full implementation of Children's Act/ legal provision for universal access to health care.
13. Full adherence to the Abuja Declaration not yet reached.(15% of GDP into Health

THANK YOU