

NATIONAL YOUTH SUMMIT ON HEALTH AND DEVELOPMENT REPORT



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Day 2 NATIONAL YOUTH SUMM

on Health and Development

"ABOUT YOUTH, FOR YOUTH, AND BY YOUTH!"







EXECUTIVE SUMMARY



Adolescents and Youth account for approximately 60% of the whole population in Tanzania. Adolescents aged 10-19 account for about a fourth of the total population (12,439,677)[1] in the country. The Youth Summit aimed to reposition the national adolescents and youths' Sexual Reproductive Health and Rights (SRHR) agenda towards a narrative owned by Tanzanian adolescents and youth. Specifically, it aimed at amplifying adolescents' and youth voices on how the societal structures and systems are responding to their Sexual Reproductive Health and Rights (SRHR) related needs; deliberate on existing adolescent and youth engagement frameworks at all levels towards improving their meaningful involvement and participation, to ensure full implementation of strategic documents such as the National Accelerated Action and Investment Agenda for Adolescent Health and Wellbeing (NAIA_AHW); and mobilize a nationally coordinated adolescent and youth movement by sharing best practices and innovations that address Adolescents and Youth Sexual Reproductive Health and Rights (AYSRHR) challenges in Tanzania.

The Youth Summit brought together a total number of 220 youth participants from across the country. Participants came from diverse backgrounds and geographical locations, even though not all regions were fully presented.

[1] National Bureau of Statistics (NBS) 2018 Report

PRIORITY AREAS

The three days dialogue which was opened by Hon. Kheri James, DC Ubungo, highlighted key priority areas that be addressed to ensure that all young people are reached with adequate information and services needed to better their lives and become contributors to the national economy. The key priority areas identified were:







- a. The government and other stakeholders to continue to expand youth-friendly services and information in Tanzania. For sexual and reproductive health services program to be friendly, it has to include accessibility, availability, acceptance, affordability, privacy, comfortability, confidentiality, a conducive environment, and skilled health providers. The use of community health workers (CHW) who are trained in providing youth-friendly services out and in-school gatherings is also key in reaching out to out-of-school youth. To ensure inclusion, three layers approach in dealing with stigma, such as the language of choice, understanding the client's abilities, and making people with disabilities important stakeholders, is also key to an effective youth-friendly service program.
- b. As Comprehensive Sexuality Education is being integrated into the school curriculum, the government and other stakeholders are to ensure that teachers are trained and ready to deliver it.
- c. The government to continue to implement existing policies that promote young people's rights to services and information while reviewing and amending all harmful laws such as the marriage act, to protect young people's rights to education and Sexual Reproductive Health
- d. Youth issues in Tanzania go beyond SRHR. There is a need to address youth issues by considering other cross-cutting issues such as climate change and mental health
- e. There should be youth-specific recommendations and participation in preparing the Human Rights shadow reports in Tanzania.

PRIORITY AREAS





- a. Through the youth coalition, young people should be mobilized nationally to participate fully in decision-making tables at the national and sub-national levels for the implementation of NAIA and other related strategic documents.
- b. Establishing a nationally coordinated and unified youth voice through a participatory process when preparing future youth summits.



BACKGROUND & INTRODUCTION



Adolescents and Youth account for approximately 60% of the whole population in Tanzania. Adolescents aged 10-19 account for about a fourth of the total population (12,439,677)[1] in the country. This large cohort presents a significant potential for the country's socio-economic development and increased productivity if investments are made to improve health and expand the opportunities of this age group. Tanzania is known for its strong favorable policy environment for adolescents and youth sexual and reproductive health and rights (SRHR) and family planning[2].

The National Accelerated Action & Investment Agenda for Adolescent Health and Wellbeing (NAAIA), which was launched in 2021, focuses on adolescent health and wellbeing, an area demanding a collective, strategic, and sustainable approach. This document has underscored the importance of this group that has thus far received divided attention. NAAIA builds on the efforts to define the National Health and Development Strategy in trying to develop an agenda that is anchored on catalytic and accelerated action and investments to improve the status of adolescents in the country.

Goal

The Youth Summit aimed to reposition the national adolescents and youths' Sexual Reproductive Health and Rights (SRHR) agenda towards a narrative owned by Tanzanian adolescents and youth.

Objectives

- **01.** To amplify adolescents' and youth voices on how the societal structures and systems are responding to their Sexual Reproductive Health and Rights (SRHR) related needs.
- O2. To deliberate on existing adolescent and youth engagement frameworks at all levels towards improving their meaningful involvement and participation, to ensure full implementation of strategic documents such as the National Accelerated Action and Investment Agenda for Adolescent Health and Wellbeing (NAIA_AHW).
- **03.** To mobilize a nationally coordinated adolescent and youth movement by sharing best practices and innovations that address Adolescents and Youth Sexual Reproductive Health and Rights (AYSRHR) challenges in Tanzania.

^[1] National Bureau of Statistics (NBS) 2018 Report

^[2] Global Youth Family Planning Index, 2016, Population Reference Bureau (PRB), Inform, Empower, Advance

THE SUMMIT - DAY 1

OPENING CEREMONY



First day was aimed at introducing the objectives to participants and opening up a general discussion on the significance of having young people in sexual and reproductive health work in Tanzania. The day started with participants doing registrations and networking. Hon. Kheri James, a district commissioner from Ubungo, opened up the summit by giving a thirty minutes speech that was full of inspiration and motivation for young people to accelerate their actions on sexual and reproductive health work in Tanzania.

Otuck William a chair of The TAYAH coalition gave a brief history and background of the TAYAH coalition, and the rationale and theme of this year's Summit. Later Otuck invited the guest of honor for opening remarks which were followed by group pictures and interviews by journalists.

"NGOs and civil society organizations especially those led by young people help to bridge gaps that the government sometimes may not easily fill" - Hon. Kheri James

THE SUMMIT - DAY 1

OPENING CEREMONY

Hon. Kheri started by greeting the delegates and members of the TAYAH coalition. He emphasized that the work we are doing is complimenting the efforts of the 6th Government under President Suluhu Hassan, where among the priorities of the 6th Government is reducing reproductive health challenges including the reduction of teenage pregnancies and maternal mortality rates and this could be reflected in the huge funding channeled into improving maternal and reproductive health services across Tanzania.

Hon. Kheri James also mentioned the census report which projects that adolescents and young people constitute a big portion of our population, and thereby there is a need to emphasize good health and well-being to this age group and that the summit organized by young people and for young people gives a lot of hope about the future of Tanzania and wellbeing of people in the country.

"Sexual violence, teenage pregnancy, STIs and HIV/AIDS transmission, and mental health are among challenges facing adolescents and young people in Tanzania, we will only be able to face these challenges if we empower them and let them have good access to the right health information and friendly services." - Hon Kheri James of Ubungo.



He emphasized why it is important to have the work of civil society organizations and NGOs.

Regarding sexual and reproductive health and rights, Hon. Kheri James emphasized that most of the young people in Tanzania especially adolescent girls and young men end up losing their dreams, because of reproductive health challenges and this is because we as actors are not doing enough to reach this group with the right information and services.

Hon. Kheri James' speech ended by saying that, we as young people should keep consulting with the right people, with whom we can share our opinions and that they will be able to listen and work together to co-create meaningful solutions that respond to young people's sexual and reproductive health needs. Pictures and tea break followed the morning session on day one.

FIRST PLENARY: A DIALOGUE ABOUT YOUTH, FOR YOUTH, AND BY YOUTH!

Moderated by: Otuck William from TAYAH coalition

Speakers:

- Elizabeth Senkolo from UDSM
- Dr. Katanta Simwanza from Engenderhealth,
- Gavin Mlalizi from Kapuni media drama, and
- Rehema Mkwawa a junior gender specialty from Mwalimu Nyerere Memorial Academy



The plenary was aimed at attaining three main objectives which are;

- Deliberating the current situation on AYSRH in Tanzania through a youth lens
- Establishing the National Youth Summit Framework towards identifying THREE key priority areas of intervention that would accelerate the implementation of AYSRH-focused national strategic documents such as National Accelerated Investment Agenda for Adolescent Health and Wellbeing (NAIA).

FIRST PLENARY: A DIALOGUE ABOUT YOUTH, FOR YOUTH, AND BY YOUTH!

The plenary was opened by moderator Otuck, who asked a general question to panelists, on what Sexual Reproductive Health and Rights mean to them. All panelists touched on these main themes; growth and self-awareness, health rights for all, right to information and services, and finally mental health and emotional intelligence.

Regarding the challenges, panelists had different views. Elizabeth, who represents youth living with disabilities said a big challenge is a stigma from society when accessing information and services. She added by saying that young people with disabilities are assumed to be asexuals and that aren't engaging in sex and relationships,

something that is

Gavin from the Kapuni TV show and a representative from the adolescent group shared how parents and caregivers can play an important role in sharing information. Gavin said parents are people we trust and should be able to provide us with the right information.



Dr. Katanta from Engenderhealth spoke about the importance of strengthening youth-friendly services to be more friendly to young people wanting services.

The panel ended with Rehema sharing her story and insisting on revisiting our social and cultural values to meet the needs of young people.

This plenary was followed by questions and answers from participants and recommendations.

BREAKOUT SESSION 1: REACHING ADOLESCENTS AND YOUNG PEOPLE ACROSS TANZANIA, WHAT WORKS AND WHAT DOESN'T WORK

Moderated by: Ronald Rubaga from Restless Development

Speakers:

- Furahini from Msichana Initiative
- Eva Nyarongo from Sauti ya Wanawake Ukerewe
- Elibarik Simon from the Young and Alive initiative



The objectives of this session were;

- Share and deliberate on practical approaches in AYSRH programming that resulted in increased reach to adolescents and youth despite challenging landscape and context
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BREAKOUT SESSION 1: REACHING ADOLESCENTS AND YOUNG PEOPLE ACROSS TANZANIA, WHAT WORKS AND WHAT DOESN'T WORK

The moderator started by pausing a question, what approaches do you use to reach out to youth and engage them in your programs?

Furahini from Msichana Initiative started by giving an illustration of their pilot program where twenty girls were selected given a certain amount of money and asked to solve a particular social problem in Dodoma. Dodoma is the region with a high rate of child marriage based on recent studies. What Msichana does is capacitate them on government protocols, partnership strengthening, and reporting processes. The aim is to see how youth operates when they are given chances and space. So in the end you find they do it better when deciding on their own than when they are decided by leaders.

Eva Nyalong from Sauti ya Wanawake Ukerewe shared their experience that they work within the school and out of school whom they call Mama Kijana (teen mothers). For school, they have five schools in Ilemela and five schools in Nyamagana (both secondary schools) that they're authorized to provide Comprehensive Sexuality Education (CSE). They do it every Friday and on holidays. However, they submitted a request to start visiting primary schools as it's important to reach the younger population. Those out of school are trained in different life skills including driving, sewing, journalism, and baking depending on their preferences.



BREAKOUT SESSION 1: REACHING ADOLESCENTS AND YOUNG PEOPLE ACROSS TANZANIA, WHAT WORKS AND WHAT DOESN'T WORK



As for the Young and Alive Initiative Elibarick elaborated on the different approaches that they use to reach and engage young people on capacity strengthening, youth-led organizations, and to women right based organizations to create champions and advocacy. Community dialogue also has been one of the approaches in bringing youth and the gatekeepers together to speak and discuss the social-cultural challenges related to sexual and reproductive health. Elibariki reflected on the power of edutainment in reaching young people on sexual and reproductive health.

The participants were then allowed to ask questions and these sparked a discussion among participants. Some of the following questions that emerged from participants, included how people with disabilities and other key vulnerable populations are included in program designing and implementation. Another interesting topic that emerged was how we reach adolescents and young people most affected by climate change and how sexual and reproductive health have a link to climate change.

BREAKOUT SESSION 2: COMPREHENSIVE ADOLESCENTS AND YOUNG PEOPLE SEXUAL AND REPRODUCTIVE HEALTH INFORMATION, INNOVATION, AND ACCESS.

Moderator: Barbara Mlata

Speakers:

- Furahini from Msichana Initiative
- Eva Nyarongo from Sauti ya Wanawake Ukerewe
- Elibarik Simon from the Young and Alive Initiative



This session's objectives were to;

- Explore barriers to adolescents and youth's access to SRH information in a Tanzanian context
- Explore new realities and opportunities in leveraging technological advancement for improved adolescents and youth's utilization of Comprehensive Sexuality Education in Tanzania
- Share successful innovation stories in AYSRH information sharing (CSE).

BREAKOUT SESSION 2: COMPREHENSIVE ADOLESCENTS AND YOUNG PEOPLE SEXUAL AND REPRODUCTIVE HEALTH INFORMATION, INNOVATION, AND ACCESS.

Technology is changing the way we live and interact with each other. It has also changed the way in which we make decisions about our reproductive health. But there are many challenges that surround the use of technology in sexual reproduction health and rights. Participants of the sessions are saying the first challenge is that not all people can afford or have access to these technologies. The second challenge is that some of these technologies may not be available in parts of the world, where they are needed most. The third challenge is that there may be a lack of regulation around how these technologies are used, which can lead to exploitation by those who have access to them

"One of the best ways to create a healthier future is by investing in innovative research and science and we have the opportunity to change that today." - Moderator

On reflecting on how technologies could help accelerate access to sexual and reproductive health information. All participants agreed that in order to increase the scope of sexual health information then the use of digital technology is inevitable, and there have been a number of digital interventions to promote access to sexual health information, but yet there number of challenges in these interventions, some of these interventions include the following;

- Technology is often a double-edged sword. It can be used to improve health and rights but it can also be used against us. For example, technology in reproductive health has been used by the government to track and control women's bodies.
- The level of digital literacy among young people in Tanzania can often expose young people to information that is not correct.
- There have been fewer interventions around privacy and digital safety for users.



BREAKOUT SESSION 3: COMPREHENSIVE ADOLESCENTS AND YOUNG PEOPLE SEXUAL AND REPRODUCTIVE HEALTH SERVICES, INNOVATION, AND ACCESS.

Moderator: Godlove - TAYAH coalition

Speakers:

- UMATI representatives
- Salama foundation representative



The aim of this session was to:

- Explore barriers to adolescents' and youth's access to SRH services in a Tanzanian context.
- Exploring new realities and opportunities in leveraging technological advancement for improved adolescents and youth's utilization of SRH services in Tanzania.
- Sharing success innovation stories in AYSRH information sharing (CSE).

Godlove opened a panel discussion by asking a question on what we mean by youth-friendly health services. All the speakers responded that for sexual and reproductive health services to be friendly there should be these elements such as accessibility, availability, acceptance, affordability, privacy, comfortability, confidentiality, a conducive environment, and having skilled health providers.

BREAKOUT SESSION 3: COMPREHENSIVE ADOLESCENTS AND YOUNG PEOPLE SEXUAL AND REPRODUCTIVE HEALTH SERVICES, INNOVATION, AND ACCESS.

Again the moderator asked the panelists what could be the challenges of sexual and reproductive health faced by young people in our context.

The panelists responded by saying that there is generally an inadequate number of health providers in health facilities who are trained on providing youth-friendly services and inadequate health centers, particularly in the rural and remote areas, make it difficult for youth and young people to access the centers and sexual health services in general.

Social norms and taboos created by our society make it difficult for health centers to have separate rooms for youth to access SRHR services. This is not only bounded by social norms but also resources and unawareness of youth needs. However, one of the participants argued having the isolated room just for youth will contribute to and accelerate the stigma and discomfort of young people who will then lead to a decrease in response to the SRHR uptake.

To expand the conversation, Godlove asked the participants; "in which ways should the NGO reach the diversity of youth in different areas?"

They replied by highlighting meaningful youth engagement in the projects from the initial stage to the evaluation stage in order to bring a sense of ownership and adequately address youth needs. Second, through the use of community health workers (CHW) who are trained in providing youth-friendly services in their context and school outreach methods of having out and in-school gatherings e.g. intercollege bonanzas, peer-to-peer gatherings and international days, for example, International youth day, etc.

Day one was closed with general reflections, participants filling up the evaluation forms, ice breakers, and later lunch.



THE SUMMIT - DAY 2

PLENARY: ENABLING ENVIRONMENT

Moderator: Rahim Nasser - TAYAH coalition

Speakers:

- Navina Mutabazi (Pollicy)
- Rachel Magegea (Pollicy)
- Agnes (Msichana Initiative)
- Peter (UNICEF)



Rahim opened a plenary session by introducing the speaker and the objectives of the plenary session which include the following;

- Explore the role favorable policy and legal AYSRH frameworks play in responding to adolescents and youth SRH needs in Tanzania
- Explore key barriers faced by service providers and other implementers in implementing existing AYSRH policies

PLENARY: ENABLING ENVIRONMENT



Navina and Agnes spoke about the National Accelerated Investment Agenda for Adolescents Health and Wellbeing and how this strategy provides a roadmap for actions in tackling adolescents and young people sexual and reproductive health challenges. Navina shared how Pollicy integrates digital lessons to young people, on how digital solutions are new opportunities to provide services and information among people, while Agness shares examples of the Msichana Initiative leveraging on global frameworks to challenge harmful laws and policies in Tanzania for instance the current marriage act.

Rachel built up on Agnes's discussions regarding the legal environment on whether they could tackle sexual and reproductive health challenges. For instance, the marriage act in Tanzania still hinders girl children and generally threatens their reproductive rights and health. She emphasized the importance of understanding regional and international frameworks such as the Maputo protocol and the Universal Declaration of Human Rights, which promote adolescents' and young people's sexual and reproductive health.

Finally, Peter from UNICEF builds upon the ongoing discussions of challenging the harmful laws and policies that are hindering sexual and reproductive health rights for young people for instance the current marriage act of Tanzania. He finalized his speech by sharing about the BINTI campaign run by UNICEF with other partners and asked delegates to join the voice by signing the online petition enforcing the amendment of the harmful marriage act in Tanzania.

The plenary was closed by follow-up questions and answers from the participants and later a morning tea break.

The tea break was followed by breakout sessions, where delegates were assigned to three breakout sessions, which are as follows.

BREAKOUT SESSION 5: HUMAN RIGHTS MECHANISMS, TOOLS, AND INSTRUMENTS.

The aim of this breakout session includes the following:

 Identifying human rights mechanisms, tools, and instruments that can be used to advance AYSRHR in Tanzania



BREAKOUT SESSION 5: HUMAN RIGHTS MECHANISMS, TOOLS, AND INSTRUMENTS.

This session started with a great presentation from Perpetua Senkolo, a program officer from Tanzania Human Rights Defenders (THRD's) sharing on the human rights mechanism in Tanzania. Perpetua said that among other human rights mechanisms, the Universal Periodic Mechanism is one of the most effective ones. She then said the UN Human Rights Council is made up of 47 members. Normally countries go through evaluations before doing a general report to the UN Human Rights Council. The shadow reports are normally made by civil society organizations and other actors to complement the government report.

Perpetua shared that there are challenges related to this system, for instance when the suggestions are brought back to the government, not all are normally taken and agreed upon by the governments of the member countries. For instance, in Tanzania, the issue of marital rape is normally denied by the government. Lastly, she emphasizes that in Tanzania we normally don't have youth-specific recommendations and participation in preparing the shadow reports. She finalized the presentation by inviting young people to participate in the midterm review of human rights situations in the country will be in 2021. and then a dull review in 2026 before the final reports are sent to the UN council. This presentation was followed by questions, answers, and recommendations from youth participants on how they could leverage the current mechanisms to report human rights and work together to develop youth-led reviews and recommendations in the process.



BREAKOUT SESSION 6: GENDER AND OTHER CROSS-CUTTING ISSUES

The aim of this breakout session includes the following:

• Exploring the role of gender and gender parity in advancing AYSRHR in Tanzania.



Moderator of the session was Sesilia Shirima from Young and alive and opened the breakout session by creating the context by differentiating gender and sex. Sesilia explained that as soon as a child is born, society recognizes that it is of a certain type of sex and not with a certain gender. The discussion went on to emphasize that the view of most men believing that reproductive issues are only for women in our society, should be challenged.

This breakout session ended with questions and answers from the participants.

Following the breakout sessions, participants reconvened for a feedback session which was followed by an afternoon plenary session.

PLENARY: INCLUSION, DIVERSITY-LEAVING NO ADOLESCENTS AND YOUTH

Moderator: Innocent Grant - Young and Alive Initiative

Speakers:

- Kevin Kakorozya a fashionista and youth mental health advocate,
- Mr. Rajab Rajab from Youth with a disability,
- Denice Simeo from Marie stopes,
- Hilda Tweve from Makete representing AGYW from rural communities and
- Sesilia Shirima from the Young and alive initiative.

The objectives of the session were;

- Identifying and recognizing various adolescents and youth groups and their intersectionalities, and the need for DEI in the Tanzanian context
- Solidifying the importance of using a Rights-Based approach in AYSRH programming for improved inclusion and diversity.



PLENARY: INCLUSION, DIVERSITY-LEAVING NO ADOLESCENTS AND YOUTH



Kelvin, a mental health advocate, spoke about stigma among minority groups in Tanzania, and this stigma starts from the families to communities, and finally to the service provisional centers. Kevin gave a brilliant difference between someone being accepted and feel included, he said "minority groups are generally not accepted by many, but in some circumstances we are included, I think we should start emphasizing on acceptance of everyone and inclusion will never be a big deal".

Denice from Marie Stopes adds to build on Kevin's point about the inclusion of minority groups in healthcare provision centers. Denice says Marie stopes provides friendly services to all clients including adolescents and young people. He adds by saying that Marie Stopes health care providers have been trained to not be biased toward clients who seek services and emphasizes that health care providers should be trained on personal biases towards clients, this way we will be able to increase the scope of friendly services.

Rajab who works with youth with disabilities organizations shares his own experiences of stigma when it comes to sex and relationships. Rajab said, "As a person who can't see, how am I able to recognize the beautifulness of a person and be able to fall in love as community norms ties that, you should be able to see someone before falling in love".

PLENARY: INCLUSION, DIVERSITY-LEAVING NO ADOLESCENTS AND YOUTH

Rajab said there are different angles of discrimination for anyone, and he finalizes his speech by highlighting three layers approach to dealing with stigma including the way we choose to use language, understanding the beneficiary's abilities, and finally taking people with disabilities as important stakeholders.

Hilda Tweve from Makete shares her experience in accessing services and information at Makete district and Hilda says "in a facility with only one health care provider, there is a lot of bias since she works to provide service to our parents and ourselves, you just have to be careful before going to health care center". Hilda adds by sharing her experience working with the Epic project and Young and Alive Initiative by linking AGYW to services centers, family planning clinics, and access to PrEP.

Finally, Sesilia Shirima finalized the plenary, by adding that young people are not a homogenous group. Sesilia shares an experience working with a group of 25 young mothers based in Mbagala Dar es salaam, Sesilia said "we may think AGYW living in Dar es Salaam are privileged and are homogenous, but let's look at a group of 25 young mothers I worked with in Mbagala Dar es salaam, working as commercial sex workers and earning very little income, they are biased from communities to health care provision centers". Sesilia says that, if we want to be inclusive we should learn to understand our differences in needs and be able to act accordingly.

This plenary was closed with questions and answers from delegates, and later an evaluation form was shared for participants to fill in later delegates were invited for lunch and closing for day two.



THE SUMMIT - DAY 3

PLENARY: MEANINGFUL YOUTH ENGAGEMENT

Moderator:

Kevin Lyimo, host of a famous East African TV show called Skonga

Speakers:

- Elibarick Simon
- Eva Nyarongo
- Florida Raymond



This plenary had the following objectives:

- Share evidence and success stories resulting from the meaningful engagement of adolescents and youth in AYSR programming
- Identifying opportunities and challenges for meaningful adolescents and youth engagement in AYSRH issues
- Identifying existing platforms for meaningful adolescent and youth engagement in SRHR

Kevin sparked the discussions by requesting the panel speakers to share stories of when they felt they were not meaningfully involved in decision-making platforms.

Elibariki spoke of the leadership system in Tanzania, by saying leaders are being judged by their physical appearance and not their capabilities.

Eva Nyarongo from Ukerewe,
Mwanza added by saying that "we
sometimes tend to miss the
bigger picture and we want
instant results, and we fail to
trust the process that leads to
achievement". Eva also reminded
delegates of youth accountability,
as youth seeks to be engaged.

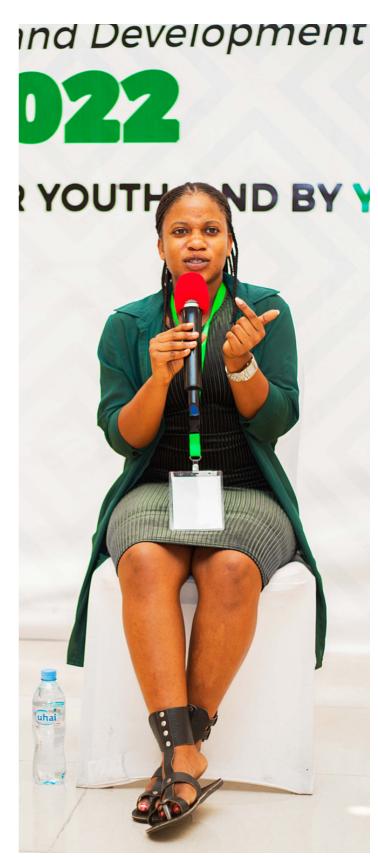
PLENARY: MEANINGFUL YOUTH ENGAGEMENT

Florida added on self-accountability by saying "inclusion in decision-making is sometimes caused by the way we present ourselves including the way we communicate on different issues".

This panel sparked a lot of discussions among participants and delegates, and some delegates stood to share their own stories of disappointments at times when they felt they were supposed to be included enough. For instance, Rehema from Kigamboni said, they were once invited to a conference and were given 20,000 Tsh each so as to clap hands and agree with whatever was presented by the host organization for decision-making.

Different practices were shared by delegates and some of these delegates shared effective ways of doing meaningful youth engagement, including leveraging strong youth networks and promoting the value of inclusion in decision-making platforms.

After the morning plenary session, participants had a tea break and later Dr. Maendaenda joined a mini workshop on sexual and reproductive health and rights and SMART Advocacy.



MINI WORKSHOP



Dr. Maendaenda opened up a mini workshop by introducing a summary of what SMART advocacy is, and asking participants about the differences between advocacy and activism.

Dr. Maendaenda presented the nine steps of SMART Advocacy, from conducting baseline surveys to identifying decision makers the most interesting part was on building arguments before presenting them to decision makers.

The closing of the SMART advocacy mini-workshop was followed by an introduction to sexual and reproductive health concepts by a spark question on why people have sex. This was the most interesting way to close the summit, general factors influencing sexuality were uncovered, and this opened a discussion on what we think are sexual health rights. The sexual health rights that were discussed the included right to sexual health information and friendly services, the right to consent, bodily autonomy, and many others that were been mentioned by the delegates.

Finally, the mini-workshop was closed by having a general reflection of a summit, lunch, and music.

HIGHLIGHTS OF KEY ACHIEVEMENT

The Youth Summit was the largest mobilization of young people with diverse backgrounds and from different regions. An event organized and run by youth for youth. Almost all planned topics in the program were covered as planned. Young people, engagement, and participation were visible, vibrant, and promising on all three days of the Summit. There were testimonies of learning and shared experiences. Young people expressed that the summit as a platform was a youthful, comfortable, safe, and brave space and it promoted networking and learning. All the sessions were youth-led and youth-focused. There was enough visibility both before and during the summit through mainstream media and social media engagement.



RECOMMENDATIONS

01 For government and other stakeholders

- a. The government and other stakeholders to continue to expand youth-friendly services and information in Tanzania. For sexual and reproductive health services program to be friendly, it has to include accessibility, availability, acceptance, affordability, privacy, comfortability, confidentiality, a conducive environment, and skilled health providers. The use of community health workers (CHW) who are trained in providing youth-friendly services out and in-school gatherings is also key in reaching out to out-of-school youth. To ensure inclusion, three layers approach in dealing with stigma, such as the language of choice, understanding the client's abilities, and making people with disabilities important stakeholders, is also key to an effective youth-friendly service program.
- b. As Comprehensive Sexuality Education is being integrated into the school curriculum, the government and other stakeholders are to ensure that teachers are trained and ready to deliver it.
- c. The government to continue to implement existing policies that promote young people's rights to services and information while reviewing and amending all harmful laws such as the marriage act, to protect young people's rights to education and Sexual Reproductive Health
- d. Youth issues in Tanzania go beyond SRHR.
 There is a need to address youth issues by
 considering other cross-cutting issues such
 as climate change and mental health
- e. There should be youth-specific recommendations and participation in preparing the Human Rights shadow reports in Tanzania.



02 For young people and the youth coalition

- a. Through the youth coalition, young people should be mobilized nationally to participate fully in decision-making tables at the national and sub-national levels for the implementation of NAIA and other related strategic documents.
- Establishing a nationally coordinated and unified youth voice through a participatory process when preparing future youth summits.

RECOMMENDATIONS

- The TAYAH member to combine effort and fundraise together.
- The platform to be maintained and planning started as early as every year starts including the fundraising planning.

Major challenges and suggested mitigation measures

- Collaboration was not enough and was promising as planned at the start.
- The platform was supposed to be also decision and actionoriented where young people's demands needed urgent answers or action but there was no good platform that come out after that including having a decision maker or making the media press to society and government an ask.

 There was not enough fundraising for accommodation, transport, and other important incentives which lead to inadequate sponsorship the young people who committed to join were most those with sponsorship and those with high commitments but were able to self-sponsored.



ACKNOWLEDGEMENTS

Youth Summit would like to thank all participants and partners who contributed to ensuring a successful Summit











