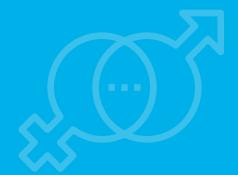
# **Sexual and reproductive** health and rights of young people



This fact sheet is part of a series which aims to facilitate the implementation of Belgian policies on sexual and reproductive health and rights (SRHR) and HIV. It is a tool to assist stakeholders of Belgian development cooperation to promote the sexual and reproductive health and rights of young people

# 1. Why invest in the SRHR of young people?

A quarter of the world's population is aged between 10 and 24, which amounts to approximately 1.8 billion young people. Never before in history have so many young people been on the verge of starting, or have recently started, their sexual and reproductive lives.

Childhood and teenage years set the stage for one's sexual and reproductive health and safety. All young people need to understand the physical, emotional, cognitive and social changes they will face during this, and further life stages, to enable them to enjoy their emerging sexuality and safely pass to sexual maturity.

International human rights and international, regional and national policy documents lay down the obligations of governments to promote and protect the sexual and reproductive health and rights (SRHR) of young people. However, the SRHR of adolescents (10-19) and youths (15-24) are easily overlooked, as is illustrated by the following statistics:

- About 16 million girls between 15 and 19 years old give birth each year, about 11% of all births worldwide. In sub-Saharan Africa more than 50% of pregnancies occur during adolescence.<sup>2</sup> Babies of adolescent mothers have lower survival chances.3
- Complications from pregnancy and childbirth are the second leading cause of death globally among girls aged 15 and 19.4 3 million girls in this age category undergo an unsafe abortion each year.5
- Almost 40% of new HIV infections occur in children and young people and AIDS is one of the main causes of death among adolescents globally.6
- 3 million girls, the majority under the age of 15, are at risk of undergoing female genital mutilation each year<sup>7</sup> and 39,000 girls a day are subjected to child, forced or early marriage.<sup>8</sup>

The majority of sexual and reproductive physical health-related problems in young people are preventable and treatable.

When the SRHR needs of young people are met and their rights are fulfilled, they are better equipped to:

- Take advantage of educational, labour and other opportunities that will impact their lifelong wellbeing and the socio-economic development of the communities and countries they live in.
- To improve their wellbeing and health and to protect themselves and their partners against STIs, including HIV, avoid unwanted pregnancies, unsafe abortions and sexual and gender-based violence.
- Understand and question norms, values and practices on gender, sexuality and reproduction and participate meaningfully in society.



<sup>&</sup>lt;sup>1</sup>For an overview of a number International Human Rights Instruments related to SRHR, see IPPF (2008) Sexual Rights: An IPPF declaration and UNFPA and Center for Reproductive Rights (2013) http://www.unfpa.org/publications/icpd-and-human-rights; <sup>2</sup>http://www.jahonline.org/article/51054-139X(14)00428-5/fulltext <sup>3</sup>http://www.who.int/mediacentre/factsheets/f3364/en/

<sup>&</sup>quot;http://www.wno.int/mediacentre/factsneets/rs/s4-yen/
"http://aps.who.int/adolescent/second-decade/section3/page2/mortality.html

"http://www.who.int/adolescent/second-decade/section3/page2/mortality.html

"http://www.unaids.org/sites/default/files/en/media/unaids/contentassets/documents/factsheet/2012/20120417\_FS\_adolescentsyoungpeoplehiv\_en.pdf

"http://www.un.org/womenwatch/daw/csw/csw52/statements\_missions/Interagency\_Statement\_on\_Eliminating\_FGM.pd

"http://www.unicef.org/media/media\_68114.html

# 2. What is the role of Belgian development stakeholders?

Belgian development stakeholders and their partners (public authorities, multilateral agencies, civil society organisations, including youth organisations, research institutions, etc.) should work together:

- To support the implementation of rights based national policies and programmes for the SRHR of young people, including access to youth-friendly services, comprehensive sexuality education, family planning and safe abortion services. Key ministries involved in the promotion of the SRHR of young people include the ministries of health, education, youth, gender equality and justice.
- To promote SRHR for young people during the policy dialogue with development partners.
- To promote a multi-sectoral response by addressing SRHR of young people in health specific and non-health specific interventions.
- To promote a transversal approach to SRHR for young people by integrating the topic in the various phases of the programme cycle.
- To ensure youth involvement in development policies and programmes and to strengthen civil society youth organisations.
- To analyse, monitor and evaluate national policies and address barriers to SRHR for young people.

See the annex for an indicative list of questions in view of the promotion of SRHR for young people.

## 3. Major topics

## 3.1 Comprehensive Sexuality Education

Comprehensive sexuality education (CSE) emphasises a holistic approach to human development and sexuality and is designed to equip young people with the knowledge, skills, attitudes and values they need to determine and enjoy their sexuality - physically and emotionally, individually and in relationships. Evidence has shown that comprehensive sexuality education that is age-appropriate, gender-sensitive and life skills-based, can provide young people with the knowledge, skills and efficacy to make informed decisions about their sexuality and lifestyle.9

CSE -programmes should feature a number of characteristics, such as, inter alia: 10

- Based on scientifically accurate information.
- A positive approach to sexuality.
- Clear messages about behaviour to reduce the risk of STIs or unwanted pregnancies.
- Address personal values and perceptions about sexuality and reproduction.
- Place gender equality and human rights at the heart.
- Address vulnerabilities and fight exclusion.
- Promote local ownership and cultural relevance.

Belgian development stakeholders and partners should look for opportunities to include CSE wherever possible. When developing CSE it is important to reach young people before they become sexually active. Government bodies, schools and educators could be assisted to design and/or implement comprehensive sexuality education programmes for young people both in and out-of-school settings. Equally important is making the case for CSE and to involve key stakeholders such as young people and their parents.

<sup>9</sup>UNESCO and UNFPA, Youth and Comprehensive sexuality Education; UNESCO. 2009. International Technical Guidance on Sexuality Education; IPPF. 2011. From Evidence To action: Advocating for comprehensive sexuality education pp3 http://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-sexuality-education.pdf. United Nations Population Fund, State of the world population 2014: the power of the 1.8 billion, adolescents youth and the transformation of the future. UNFPA, New York; 2014. Available at http://www.unfpa.org/sites/default/files/pub\_pdf/EN-SWOP14-Report\_FINAL-web.pdf

#### 3.2 Youth-friendly SRH services, accessible to vulnerable young people

Youth friendly service delivery is based on an understanding of, and respect for, the realities of young people's diverse sexual and reproductive lives. Youth-friendly services are confidential, non-judgmental and accessible to all, irrespective of age, marital status, sexual orientation, residency or ability to pay. Service providers are trained to work sensitively and respectfully with young people on their sexual and reproductive health needs. Belgian development stakeholders and partners could work towards making services more welcoming and accessible to young people.<sup>11</sup>

#### 3.3 Ensure youth participation

At supranational level or at the level of the national or local government young people should be consulted on matters or decisions that affect them. Meaningful youth participation offers benefits both to young people and to the development organisations that serve them. Belgian development stakeholders and partners could establish or strengthen youth advisory boards, representing countries' diverse youth constituencies and to advise government bodies and policies. Development partners could promote direct youth leadership and participation in the design, implementation and evaluation of programmes.

# 4. Indicative list of questions in view of the promotion of SRHR of young people

Below are a number of non-exhaustive questions that could be raised during the policy dialogue with the development partners and throughout the programme cycle.

#### → What are the legal barriers in relation to young people's access to SRHR?

- o What is the legislation on parental consent for minors accessing SRHR services?
- o What is the impact of the criminalisation of sexual intercourse before the age of consent, criminalisation of non-heterosexual relations, criminalisation of contraceptive methods or abortion?
- o Is the legislation on sexual violence or on traditional harmful practices (e.g. female genital mutilation and child, forced and early marriage) effectively applied?

#### → What are the policy barriers that impact young people's access to SRHR?

- o Are young people given enough attention in national policies and strategies?
- o Are there enough opportunities for young people and other stakeholders to participate in policy decision-making processes?
- o With regard to the lack of age disaggregated data in relation to SRHR or the lack of evidence-based health policies, adapted to the national, regional and local context?

## $\Rightarrow$ What are the shortcomings to achieve youth-friendly SRHR services?

- o Is there a lack of skilled providers?
- o Are there any confidentiality, acceptability, accessibility issues? Have services not been adapted to the social determinants of young people (income, place of residence, gender, etc.)?
- o What are the costs of services?

#### → What are the barriers to SRHR information and education?

- o Lack of knowledge on SRHR or inadequate skills, attitudes and values of parents, peers and teachers?
- o Lack of educational policies on comprehensive sexual education?
- o Lack of CSE in school curricula?
- o Lack of interventions for out-of-school young people?

<sup>&</sup>quot;The International Planned Parenthood Federation, Provide: Strengthening youth friendly services, IPPF, London; 2008. Available at http://www.ippf.org/resource/Provide-Strengthening-youth-friendly-services

#### → What are barriers on the level of the community?

- o Are there any harmful traditional practices, social norms and behaviours on matters related to sexuality and reproduction such as female genital mutilation, sexual and gender-based violence, forced, child and early marriage, etc.?
- o Do taboos, stigma and discrimination related to young people's sexuality in general or specifically towards sexual orientation and gender identity exist?

# 5. Further reading

#### Sexual and reproductive health and rights for young people

- → World Health Organisation, Supplement to the Journal of adolescent health. WHO, 2014. Available at http://www.jahonline.org/issue/S1054-139X(14)X0004-2
- → World Health Organisation, Health for the world's adolescents, A second chance in the second decade. WHO, Geneva; 2014. Available at http://apps.who.int/adolescent/second-decade/
- → United Nations Population Fund, State of the world population 2014: the power of the 1.8 billion, adolescents youth and the transformation of the future. UNFPA, New York; 2014.
  Available at http://www.unfpa.org/sites/default/files/pub-pdf/EN-SWOP14-Report\_FINAL-web.pdf
- → Initiative: Young People Today http://youngpeopletoday.net/sexual-and-reproductive-health/

#### **SRHR** youth programming

- → World Health Organisation, Making health services adolescent friendly: developing national quality standards for adolescent friendly health services. WHO, Geneva; 2012. Available at
- → World Health Organisation, Developing sexual health programmes, A framework for action. WHO, Geneva: 2010.
  - Available at http://www.who.int/reproductivehealth/publications/sexual\_health/rhr\_hrp\_10\_22/en/
- → The International Planned Parenthood Federation, Provide: Strengthening youth friendly services, IPPF, London; 2008. Available at
  - http://www.ippf.org/resource/Provide-Strengthening-youth-friendly-services

## **Comprehensive Sexuality Education**

- → United Nations Educational, Scientific and Cultural Organization, International Technical Guidance on Sexuality Education, An evidence-informed approach for schools, teachers and health educators. UNESCO, Paris; 2009.
- Available at http://unesdoc.unesco.org/images/0018/001832/183281e.pdf
- → United Nations, factsheet: Youth and comprehensive sexuality education: http://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-sexuality-education.pdf
- → UNESCO, sexuality education: http://www.unesco.org/new/en/hiv-and-aids/our-priorities-in-hiv/sexuality-education/

### **Youth Participation**

→ The International Planned Parenthood Federation, Participate: The voice of young people in programmes and policies. IPPF, London; 2008. Available at http://www.ippf.org/resource/Participate-voice-young-people-programmes-and-policies

## 6. Contact

Contact details of the Social Development Unit (D2.3) of DG Development Cooperation

Federal Public Service Foreign Affairs, Foreign Trade and Development Cooperation General Directorate for Development Cooperation and Humanitarian Aid Rue des Petits Carmes, 15 1000 Brussels Belgium Tel. +32 2 501 81 11

www.diplomatie.belgium.be www.dg-d.be Editor-in-chief: Dirk Achten, Rue des Petits Carmes 15 - 1000 Brussels

This publication has been made with the support of the SRHR Working Group of the Belgian platform Because Health - www.be-causehealth.be.