YOUTH IN POWER:
DEVELOPING A YOUTH STRATEGY FOR
SEXUAL AND REPRODUCTIVE HEALTH
AND RIGHTS IN EUROPE AND
CENTRAL ASIA
A PROJECT IMPLEMENTED BY:

WITH SUPPORT OF:
The “Youth in Power” project proposal was developed by YouAct, in partnership with Y-PEER, YSAFE, ASTRA Youth and submitted for funding to the Council of Europe’s European Youth Foundation (EYF). The proposal was successful and granted 2/3 of the funding while UNFPA Eastern Europe and Central Asia Regional Office agreed to co-fund the project by providing 1/3 and supporting the expansion of the project to include Central Asia. In this regard, IPPF EN provided support and facilitated the operations for co-funding. The PETRI-Sofia Center also joined the project planning and implementation. All partners worked in close collaboration in all stages of the project.

The overall aim of the project was to develop an up-to-date and comprehensive Youth Strategy for Sexual and Reproductive Health and Rights (SRHR) based on the input, experience, needs and ideas of young people in Europe and Central Asia, with the aim of serving as an advocacy and awareness raising tool on SRHR of young people on the national, regional and international level.

The main objectives set by the project team were:

1. To collect data via an online questionnaire on the current gaps and challenges regarding the realization of SRHR of young people, and also receive feedback from them on recommendations, measures and actions that need to be taken by youth-led networks and national and regional policy- and decision-makers.
   (Read more about this in Chapter 1)

2. To bring together youth SRHR activists in order to build their advocacy skills and to develop a joint Youth Strategy for Sexual and Reproductive Health and Rights based on the input, experience, needs and ideas of young people in Europe and Central Asia. In this regard, a study session was organized that brought together youth activists and members of partner SRHR youth-led networks. They have reviewed the gaps and challenges regarding the realization of SRHR of young people and prepared a list of recommendations, measures and actions that need to be taken in order to advance the safeguarding of the Sexual and Reproductive Health and Rights of all young people living in Europe and Central Asia. (Read more about this in Chapter 2)

3. To disseminate the Youth Strategy for SRHR for Europe and Central Asia via:
   a. an awareness raising campaign (online and through meetings with peers at a local level) aiming to increase young people’s awareness of their Sexual and Reproductive Health and Rights issues.
   b. advocacy activities with policy makers at a national level and at a regional level, aiming to increase their commitment to realize SRHR as Human Rights for young people at a local level and across Europe. Advocacy activities include introducing the Youth Strategy for SRHR to national and regional policy-makers and decision-makers through letters and meetings. (Read more about this in Chapter 3)

Given that the project outcome is derived from young people’s knowledge, experiences, needs, ideas and visions, it is a powerful tool which young activists can use for further empowerment and advocacy work.
METHODOLOGY

01- ONLINE SURVEY:
The first part of the project focused on developing, disseminating and collecting information via an online survey. The aim was to collect data on the current gaps and challenges in youth policies and also receive feedback from young people regarding recommendations, measures and actions that need to be taken by youth-led networks and policy and decision-makers from Council of Europe and Central Asian Countries.

The online survey\(^1\) format was adapted from one developed by the Cyprus Family Planning Association (CFPA) as part of the Erasmus+ project “Youth Shaping SRHR Policy”. The current version was further developed by young people engaged in the project. The survey targeted young people aged between 15 and 30 years old from Council of Europe or Central Asian states. The survey aimed to collect information about: young people’s access to youth-friendly sexual and reproductive health services, implementation of comprehensive sexuality education, policies and laws related to youth, meaningful participation of young people in the design, development, implementation and evaluation of policies and programmes related to youth sexual and reproductive health and rights, recommendations regarding measures, actions, practices and policies that youth networks and/or policy-makers and decision-makers should consider putting in practice.

The online survey was structured in four parts: Part A included questions aimed at constructing the respondent’s profile, Part B focused on aspects related to information and education on the topics of Sexual and Reproductive Health and Rights; Part C contained questions regarding access to sexual and reproductive health services; Part D asked about policy and legal issues, including some of them focused on youth participation in policies and decision-making processes. Most of the survey’s questions were multiple-choice or closed. The whole survey took between 10 and 15 minutes to complete. The participation of the respondents was on a voluntary basis and their answers were submitted anonymously. The online survey was advertised together with a poster and a call to action among young people aged 15-30 years old from Council of Europe and Central Asian countries.

The survey has been translated into local languages, to overcome language barriers and allow a broader reach and response rate from young people on a national level. The survey was made available in the following nine languages:


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In order to find a large number of young people willing to participate in the project and fill in the survey, various strategies were employed. The youth organizations YouAct, Y-PEER, YSAFE, ASTRA Youth, PETRI Sofia Center have been involved as partners from the planning stage, with the scope of creating a sense of ownership and sustained interest for them to support the wide dissemination of the survey. We used a broader contact list, including our members, partners and donors and asked for further distribution of the survey’s link. Online platform and social media channels also played an important role in spreading the message to a variety of audiences.

Limitations

Most of the respondents from the countries have been or are currently engaged in the civil society sector. The number of respondents to the online survey who are not members or volunteers of non-profit organizations is quite low. Having some level of experience on issues related to youth work, in particular regarding youth rights, youth leadership, youth participation in their community.

The majority of respondents in the online survey come from urban areas. For most of the respondents, the highest level of education completed is a Bachelor’s degree. Therefore, the level of education, urban background, and knowledge of the English language for those who answered the English survey and interview questions indicates the respondents’ profile is most likely a limited representation of the diversity of youth backgrounds and realities within these countries.

The gender bias is also notable, as in all countries there is a dominant female group of respondents.
02- DEVELOPMENT OF THE YOUTH STRATEGY

The second part was undertaken following the data collection of youth views on the current gaps, challenges and recommendations regarding the realization of SRHR of young people in Europe and Central Asia.

A Study Session was organized and brought together youth activists in order to develop a joint Youth Strategy for Sexual and Reproductive Health and Rights based on the input, experience, needs and ideas of young people in Europe and Central Asia and interact with other key processes for the region, more specifically the Sustainable Development Goals (SDGs).

Participant’s profile included the following criteria:
- Regional focus: Europe and Central Asia
- Age: Not older than 29 years old
- Good command of English
- Proven understanding and commitment to youth development and SRHR
- Good knowledge about the youth situation in their country
- Familiar with the Sustainable Development Goals
- Able to act as a national, regional or international advocate for the youth agenda
- Be in a position to stay engaged in follow-up activities

Young activists, members of various SRHR youth-led networks from Europe and Central Asia were invited to take part in the Study Session in Kiev in order to review the gaps and challenges regarding the realization of SRHR of young people. They also prepared a list of recommendations, measures and actions that need to be taken in order to advance the safeguarding of the Sexual and Reproductive Health and Rights of all young people living in Europe and Central Asia.
All the interested applicants filled in a short online application that was asking for:

- Personal details
- Their motivation to attend - their experience, skills and interest to contribute to the development of a regional youth strategy.
- Their plans to contribute to the online survey and potential channels to be used to reach-out and ensure broad participation of young people from different social, ethnic, and cultural backgrounds etc.
- Their vision and commitment to using the strategy as a tool to increase awareness and enhance the commitment of decision makers for youth SRHR

A panel formed of youth partner organizations representatives reviewed all applications received and selected the participants to the Study Session; The list of people who attended the Study Session can be found as Annex 1 to this document.

The programme of the Study Session was developed and facilitated by young people who are representatives of the partner organizations.

The outcomes of the meeting were used as the basis for the Youth Strategy, while a preliminary Action Plan was drafted by the young people who attended the meeting and four Working Groups were formed. The initial Working Groups composition is available as Annex 2, but due to different circumstances, the actual composition changed after the Study Session in Kiev.

The team members contributing to the further development, consultation and feedback incorporation and the outcomes of their work are presented in the following Chapters of this document.

During the Kiev Study Session, based on the findings of the survey spread among young people in Council of Europe and Central Asia countries, which reflects their input, experience, needs and ideas, the meeting participants prepared a draft strategy containing a list of objectives, expected results and indicators. The draft strategy was further revised and consulted on with all the project partners after the international meeting in Kiev by the youth working group consisting of: Anuki Mosiashvili (YouAct, Y-PEER, Georgia), Ivy Miltiadou (YouAct, Cyprus), Yuliya Andzhekarska (PETRI-Sofia, Bulgaria), Simon Herteleer (YSAFE, Belgium), Myrte Halman (CHOICE for Youth and Sexuality, The Netherlands).
In December 2016, young activists from all over Europe and Central Asia met in Kiev, Ukraine to review the findings of an online questionnaire aimed at identifying the gaps and challenges young people face regarding the realization of their Sexual and Reproductive Health and Rights (SRHR). During the meeting, the group of young people prepared a draft document containing a list of objectives, expected results and indicators. The Strategy is based on the findings of the survey spread among young people in Central Asian Countries, which reflects their input, experience, needs and ideas, and work together with other key processes for the region, more specifically the 2030 Agenda and its Sustainable Development Goals (SDGs).

The draft strategy was further revised and consulted on with all the project partners after the international meeting in Kiev by the youth working group consisting of: Anuki Mosiashvili (YouAct, Y-PEER, Georgia), Ivy Miltiadou (YouAct, Cyprus), Yuliya Andzhekarska (PETRI-Sofia, Bulgaria), Simon Herteleer (YSAFE, Belgium), Myrte Halman (CHOICE for Youth and Sexuality, The Netherlands).

MISSION:
For young people, governments and stakeholders across Europe and Central Asia to use this Strategy as an advocacy tool at national and regional levels to ensure better and more meaningful youth participation at all levels of decision making regarding Sexual and Reproductive Health and Rights. This document focuses on 4 thematic areas:

- Information-Education for SRHR
- SRH Services
- Legislation and Policies regarding SRHR
- Youth Participation

VISION:
Ensure that over the next 8 years, NGOs and other stakeholders implement the suggested recommendations in this document. To ensure meaningful youth participation across all decision-making bodies and to make the voice of young people heard. Enabling young people to hold decision makers accountable and to ensure meaningful youth participation in the decision making process.

INTRODUCTION
There are more young people in the world than ever before, creating unprecedented potential for economic and social progress. There are about 1.8 billion young people between the ages of 10 and 24 – the largest youth population ever. With proper investment in their education and opportunities, these young people’s ideas, ideals and innovations could transform the future.

Despite often having helped to trigger social and political change in transition countries, young people for the most part have subsequently been excluded from decision making and the political priorities of the new order, and are increasingly disillusioned with the citizenship opportunities offered in their countries.

In Europe and Central Asia young people, the poor, illiterate women, ethnic minorities, and members of migrant, mobile populations and rural population groups face serious barriers in their participation in decision-making processes and in accessing the services and information they need to safeguard their health. Much more needs to be done to end preventable deaths and reduce mortality rates among women of reproductive age and to ensure that all individuals can exercise their basic human rights, including those related to the most intimate and fundamental aspects of life.

HIV-related deaths are down 35 per cent from 2005 – but estimates suggest that deaths among adolescents are actually rising. Globally, HIV deaths are falling, and new HIV infections are falling as well. But alarmingly, young people remain particularly vulnerable to the disease, as well as to other sexually transmitted infections (STIs). Much more must be done to provide adolescents with comprehensive sexual and reproductive health information and services, in order to help them prevent HIV and other STIs transmission, and to provide treatment for those who are infected.

Many people believe these trends are only applicable to developing countries and that European countries are an example to follow. Nevertheless, the recent proposal to ban abortion in Poland and the continued restrictiveness of the access to abortion in Ireland (abortion is against the law in Ireland unless the pregnancy endangers the life of the woman) is one of the most worrying trends in Europe and Central Asia.

Yet the rise of opposition to sexual and reproductive health and rights (SRHR) in Europe is not a recent development. Since 1989, the status of SRHR and women’s rights in Central and Eastern Europe has been in permanent crisis. It was one of the most unexpected results of the Soviet bloc’s transition from communism to democracy. Over the last decade, almost all EU member states within Central and Eastern Europe have struggled with a profoundly divided political establishment and increasing socio-economic inequalities. Many people do not see the EU as a guarantor of a dignified life and the market-driven economy did not bring the promised prosperity for all. The side effects of which include a rise in populism and opposition to SRHR, which have instilled hatred in those who feel insecure and excluded.
Despite the current decline of SRHR that can be seen across the world, active young people are the driving force of change. Youth leaders from different countries work on the promotion of SRHR, advocating for comprehensive sexuality education and access to SRH services around the globe. In Europe and Central Asia many youth-led NGOs and CSOs are actively working in this field.

The following recommendations, objectives and indicators which are part of the Youth Strategy 2017-2025 were developed by a coalition of NGOs from the region on the basis of the analysis of a survey with more than 1,000 responses from young people in the region, coming from different countries and backgrounds.

**THEMATIC AREA 1: INFORMATION-EDUCATION FOR SRHR (INCLUDING COMPREHENSIVE SEXUALITY EDUCATION - CSE)**

The term “sexual and reproductive health and rights” (SRHR) was developed nearly 20 years ago at the Cairo International Conference on Population and Development (ICPD) and the 1995 Fourth World Conference on Women (FWCW) held in Beijing. Building on the World Health Organisation’s definition of health, the Cairo Programme defines reproductive health as:

a state of complete physical, mental and social well-being and... Not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this last condition are the right of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law, and the right of access to appropriate health-care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant (para 72).

Furthermore, the Cairo Programme of Action clearly spells out the concept of reproductive rights in Chapter 7 which states in part that such rights “rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of reproductive and sexual health. It also includes the right of all to make decisions concerning reproduction free of discrimination, coercion, and violence as expressed in human rights documents. The Universal Declaration of Human Rights (1948) and other related treaties establish that human rights apply to everyone and that no one should be excluded. They identify that SRHR entails not only the absence of reproductive or sexual illnesses, but also the full enjoyment and well-being of sexual health.
SRHR, as part of human rights, have the following principles of human rights described in the Universal Declaration and outlined by the United Nations Population Fund (UNFPA):

- **Universality**: They apply equally to all persons and they are the rights of every individual, there are no exceptions. This means that SRHR apply to everyone, including all children, adolescents and young people.
- **Inalienability**: This means that you can never lose your rights. You have them, from the moment you are born, because you are human.
- **Indivisibility**: No right is more important than another right, they are all connected and you cannot have one without the other. Denial of one right impedes the enjoyment of the other rights.
- **Interdependence and interrelation**: The fulfilment of one right may depend in part or in whole on the fulfilment of other rights.

The 2030 Agenda also includes many achievements in relation to gender equality and women’s and girls’ empowerment, and sexual and reproductive health and reproductive rights which go beyond the commitments of the MDGs.

There are several targets that relate directly to SRHR, as well as those that have aspects of SRHR, demonstrating the cross-cutting nature and importance of SRHR to achieving sustainable development for all. Given the scope of the Agenda, it is most helpful to identify those targets that relate more closely to the work on SRHR and identifying the gaps that are significant in each context.

The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) specifically addresses aspects of women’s right to health. It requires the provision of equal access to educational information to help ensure the health and well-being of families, including information and advice on family planning; prohibits discrimination in the field of health care; ensures equal access to health care services including family planning; ensures provision of appropriate services in connection with pregnancy; and that women in rural areas have access to adequate health care facilities, including information counselling and family planning services.

UNESCO has noted that sexuality education can be delivered through a range of programming modalities, including: family life education (FLE), population education, sex and relationships education, SRH education and life skills education, or through dedicated sexuality education programmes. Four overarching principles guide UNFPA’s work on sexuality education: achieving social equity by paying special attention to vulnerable groups; protecting the rights of young people, particularly to health, education and civic participation; maintaining cultural sensitivity by advocating for sexuality and reproductive health in sensitive and engaging ways; and affirming a gender perspective that, while recognizing boys’ needs, preserves spaces for girls, especially the poor and vulnerable. United Nations (UN) treaty monitoring bodies have recommended that SRH education should be a mandatory component of learning. CEDAW calls on Member States to provide compulsory sexual education in a systematic manner throughout all educational institutions. Similarly the Committee on the Rights of the Child has recommended that member states include sexual education in the official programmes of primary and secondary education.

[7] After Beijing + 10 The Road Ahead
The findings of the **Youth in Power survey disseminated in English** related to information and education on SRHR are summarized as follows:

- 45.6% of respondents have never participated in a training on SRHR outside of school hours
- 36.1% of respondents have no or limited access to information related to SRHR
- 86% of respondents cited the internet as the most common source accessed for information on SRHR. Formal education accounted for only 35%
- 58.5% of respondents would like to receive more information on SRHR from schools/universities and from the health-care providers
- 61.9% of respondents would like to receive more information on emotions and emotional development, 54.2% of respondents would like to receive more information on Sexual rights and citizenship
- 68.1% of respondents think schools/universities need to have an active role in providing sexuality education to children and young people
- 75.6% of respondents would like to be involved in the drafting of policies and legislation about Sexual and Reproductive Health and Rights of young people at national level

In light of these results and based on feedback received in the survey the following objectives, expected results and indicators were identified:

**OBJECTIVE 1: TO INCLUDE AGE-APPROPRIATE CSE AS A MANDATORY SUBJECT OF FORMAL EDUCATION**

**EXPECTED RESULTS:**
1. To increase awareness on SRHR for adolescents and youth
2. To improve the access to information on the prevention of STIs, gender based violence, early marriages and unexpected pregnancies etc to be added

**INDICATORS**
- 50% of schools and universities have CSE incorporated in their curriculum in accordance with the minimal international frameworks
- Adoption of Legal framework for the inclusion of CSE as part of formal educational curricula
- Websites supported by governments and in line with recommendations from experts and young people
- The inclusion of at least one lecture/workshop within an academic year related to SRHR

**OBJECTIVE 2: TO INCLUDE CSE AS PART OF NON-FORMAL EDUCATION IN BOTH URBAN AND RURAL AREAS**

**EXPECTED RESULTS:**
1. To increase awareness on SRHR for parents and mentors
2. To increase information access on CSE in rural and urban areas through peer education, including involvement of parents
3. Increase capacity of Civil society and Non-governmental organizations involved in non formal CSE
4. Disseminate information on CSE freely and to make it readily available

**INDICATORS**
- Increased access to information among youth by 15% by 2025
- Increased funding and capacity of NGOs and CSOs providing information on CSE in rural areas

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[8] This age bracket is based on the definition as expressed in the UN Habitat report: Youth 21: Building an Architecture for Youth Engagement in the UN System (http://mirror.unhabitat.org/pmss/listItemDetails.aspx?publicationID=3393)
OBJECTIVE 3: TO INCLUDE YOUTH IN THE DEVELOPMENT OF CSE MATERIALS

EXPECTED RESULTS:
1. The creation of youth-centered material for CSE
2. Increase of youth participation in the decision making processes on CSE by 20%
3. Ensuring that CSE is youth friendly

INDICATORS
- Increase of youth participants in the decision making processes on CSE by 20%
- Content for CSE is developed involving youth
- Evaluation by students on the content and manner in which CSE is taught

THEMATIC AREA 2: SEXUAL AND REPRODUCTIVE HEALTH SERVICES

The Plan of Action proposed at the International Conference on Population and Development (ICPD) in 1994 issues in overall humanitarian response, including SRH services as part of the basic health package and implementation of Security Council Resolution 1325 on “Women Peace and Security”.

According to UNFPA’s framework document for Sexual and Reproductive Health (SRH) services:
“SRH services in the basic health-care services delivered at district and local levels, particularly primary health care, through functioning health systems that prioritize quality, equity and integration and are equipped with accountability mechanisms for users and providers. The SRH package should universally include: family planning services; pregnancy related services, including skilled attendance at delivery, emergency obstetric care and postabortion care; STI and HIV prevention and diagnosis and treatment of STIs; prevention and early diagnosis of breast and cervical cancers; prevention of gender-based violence and care of survivors.”

In 2010 UNFPA published guidance for Integrating Family Planning and STI/RTI with other Reproductive Health and Primary Health Services, where UNFPA describes the SRH packages for countries: “Each country’s essential SRH package will be determined and defined by the particular SRH needs of its population, with particular attention to the most vulnerable and marginalized populations. Central to every essential package, is the need to organize service delivery so as to maximize the integration of complementary services that can be delivered effectively,

safely and with cost-efficiencies over the delivery of individual services, and in combinations that are both acceptable to the client and feasible to the health system, and especially the provider.” [10]

It should be mentioned that Sustainable Development Goals includes target 3.7 to ensure SRH care and services: “By 2030, ensure universal access to sexual and reproductive health care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes”. [11]

According to the Youth in Power survey disseminated in English, the results related to SRH services are:

- 69.6% of the respondents usually have access to SRH services in public health centers (state hospitals, clinics)
- 39.2% of the respondents say that they don’t have any obstacles to accessing SRH services. However, 24.7% indicate that they are afraid of inappropriate approach from the health professionals (discrimination, lack of understanding/discretion), 23.1% say that cost is a factor that made it difficult to access SRH services, and 22% say that the lack of discretion, privacy and respect was a factor that made it difficult to access SRH services
- 61.1% of the respondents say that they know who/where to reach for help, if they need information about family planning, including contraceptive choices
- 65.7% indicate that they know who/where to reach for help, if they need information about sexually transmitted infections or HIV/AIDS
- 45.9% of the respondents say that they know who/where to reach for help, if they need information about safe abortion. However, 30.9% say that they don’t know where to find information and reach for help in this case
- 31.2% of the respondents say they know who/where to reach for help, if they need information about relationships. 33% don’t know and 35.8% chose the option “sometimes”
- 42.2% indicate that they know who/where to reach for help, if they have been the subject of violence (bullying, sexual violence or any other type of violence). 31.6% say they don’t know and 26.2% chose the option “sometimes”
- On the multiple choice question “Which of the actions below do you find most important in relation to SRHR in your county?” in relation with SRH services:
  - 56.1% chose “Establishment/Provision of youth friendly SRH services, including counselling centres, in public/state health centres”
  - 55.3% chose “Access for young people to free contraceptives”
  - 51.9% chose “Access to services without a requirement for parental consent”
  - 51.6 % chose “Establishment of youth-friendly SRH services, including counselling centres, in smaller municipalities/communities”
  - 36.6% chose “Establishment of information centres and drop-in centres to the community”

Taking into consideration current situations of the countries represented by the results of the survey the following objectives, expected results and indicators were identified:
OBJECTIVE 1: PROVIDE SAFE AND ACCESSIBLE SRH SERVICES FOR EVERY INDIVIDUAL

EXPECTED RESULTS:
1. Financially accessible and readily available contraceptives and consultations
2. Teenagers to have easy access to SRH services and information.
3. Have an increasing number of young people accessing SRH services both in urban and rural areas
4. Reduction of STI’s, HIV, unwanted pregnancies, unsafe abortion, etc.
5. Provide SRH services that are youth friendly
6. Creation and advertising of online counselling and learning platforms

INDICATORS:
- Access to contraceptives of at least 50% of the population disaggregated according but not limited to Age group - Gender - Ethnicity - Nationality - Political status
- Double the amount of young people accessing SRH services
- Online platforms related to SRHR for young people

OBJECTIVE 2: PROVISION OF TRAININGS FOR PROFESSIONALS, SERVICE PROVIDERS, TEACHERS AND PARENTS

EXPECTED RESULTS:
1. Ensure dissemination of correct and up to date information to professionals, service providers, teachers, parents and young people on SRH
2. Increased awareness of SRH
3. Increase knowledge on SRH and related services

INDICATORS:
- At least 20% of educators receive training on the delivery of CSE and SRH
- Launch of a nationwide campaign on SRH by 2025 based on international standards

THEMATIC AREA 3: LEGISLATIONS/POLICIES ON SEXUAL AND REPRODUCTIVE RIGHTS

Legislations and policies on SRHR are essential to ensure access of all individuals on Sexual and Reproductive Rights. According to the ICPD:
“Reproductive rights embrace certain human rights that are already recognized in national laws, international human rights documents and other consensus documents. The promotion of the responsible exercise of these rights for all people should be the fundamental basis for government and community-supported policies and programs in the area of reproductive health, including family planning.” (para 7.3)

The 2030 agenda also refers to the SRHR more specifically in the frameworks of the Sustainable Development Goals:

Goal 3 - Ensure healthy lives and promote well-being for all at all ages
- Target 3.3 By 2030 end the epidemics of AIDS, tuberculosis, malaria, and neglected tropical diseases and combat hepatitis, water-borne diseases, and other communicable diseases
- Target 3.7 By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes

Goal 4 - Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all
- Target 4.7. By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustain
able development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and nonviolence, global citizenship and appreciation of cultural diversity and of culture’s contribution to sustainable development.

**Goal 5 - Achieve gender equality and empower all women and girls**

- Target 5.1 End all forms of discrimination against all women and girls everywhere
- Target 5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking, sexual and other types of exploitation
- Target 5.3 Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation
- Target 5.5 Ensure women’s full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life
- Target 5.6. Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences

According to the findings of the *English version of the Youth in Power survey*, the results related to Thematic area 3 are:

- Answering the question “To what degree do national policies and legislation about Sexual and Reproductive Health and Rights affect your everyday life?”, 28% of the respondents chose “3” out of 5 (“1” being “A great deal” and “5” being “Not at all”).
- 24% chose “2” as their answer
- Answering the the question “To what degree do national policies and legislation about Sexual and Reproductive Health and Rights hinder your full participation in society?”, 26.4% of the respondents chose the option “5” (“Not at all”)
- On the multiple choice question “Which of the actions below do you find most important in relation to SRHR in your county?” in relation to Legislations/Policies:
  - 67.3% chose “Drafting of a national strategy on the Sexual and Reproductive Health and Rights of young people”
  - 58.3% chose “Decriminalisation of abortion”
  - 51.5% chose “Marriage equality (civil marriage for same sex couples)”
  - 45.1% chose “Legal regulation of the right of adoption for same sex couples”

According to the survey results the following objectives, expected results and indicators were defined:

**OBJECTIVE 1: DEVELOP LEGISLATION AND POLICIES ON IMPLEMENTATION OF MANDATORY CSE IN FORMAL EDUCATION AND DEVELOP STANDARDS ON CSE TO MONITOR LEGAL PROCEDURES OF THE IMPLEMENTATION ON CSE**

**EXPECTED RESULTS:**

1. Legislations and policies are developed/improved on to implement mandatory CSE in the frameworks of formal education
2. Development of mechanisms to monitor legal procedures of the implementation of CSE

INDICATORS

- Legislations and policies are developed/improved on to implement mandatory CSE in the frameworks of formal education by 2025
- The mechanisms to monitor legal procedures on implementation of CSE exist by 2025

OBJECTIVE 2: DRAFTING OF NATIONAL STRATEGIES INCLUDING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS AND CSE

EXPECTED RESULTS:

1. Improving inter-sector collaboration across governmental and non-governmental bodies working on SRHR
2. Increasing visibility of young people in national policies and in the decision making process
3. Creation of cross-sector partnerships for the implementation of the strategies

INDICATORS

- National Strategies including Sexual and Reproductive Health and Rights and CSE are developed by 2025
- Governmental and non-governmental bodies are engaged in the drafting of national strategies
- Young people are represented in the working groups drafting national strategies.
- National strategies and programs intends to raise youth participation in the implementation of the strategies and in the decision making process
- Cross-sector working groups/committees are created to implement national strategies

OBJECTIVE 3: ELIMINATE AGE OF PARENTAL CONSENT TO ACCESS SEXUAL AND REPRODUCTIVE HEALTH SERVICES

EXPECTED RESULTS:

1. The adoption of regulations to enable all young people to access SRH services
2. Decrease of age of consent to 14

INDICATORS

- Legal framework is developed to enable all young people to access SRH services and age of consent is decreased to 14.

THEMATIC AREA 4: YOUTH PARTICIPATION IN THE DECISION MAKING PROCESS.

Youth participation, also called youth involvement, has been used by government agencies, international organizations, researchers, educators, and others to define and examine the active engagement of young people in schools, sports, government, community development and economic activity. The 2003 Council of Europe’s “Revised European Charter on the Participation of Young People in Local and Regional Life”, states that “participation in the democratic life of any community is about more than voting or standing for election, although these are important elements. Participation and active citizenship is about having the right, the means, the space and the opportunity and where necessary the support to participate in and influence decisions and engaging in actions and activities so as to contribute to building a better society.”

[12] Analytical paper on Youth Participation created in partnership between the European Commission and the Council of Europe in the field of youthhttp://pjp-eu.coe.int/documents/1017981/7495153/What+is+youth+participation.pdf/223f7d06-c766-41ea-b03c-38565efa971a
Furthermore two dimensions of participation can be distinguished: Direct participation: Political decisions are influenced directly and structural links to political decision-making processes are enabled. Indirect forms of participation: Reach out to citizens and encourage them to support certain issues and positions, also enabling discussions, opinion-building as well as campaigning. In a broad and ambitious acceptance, to foster young people’s political participation is to empower them and provide them with the means and ways to become actors in their lives and in their world.

Participation is a fundamental right. It is one of the guiding principles of the Universal Declaration of Human Rights that has been reiterated in many other Conventions and Declarations. However, young people are too often excluded by decision-makers – to the detriment of youth themselves and future generations. Through active participation, young people are empowered to play a vital role in their own development as well as in that of their communities, helping them to learn vital life-skills, develop knowledge on human rights and citizenship and to promote positive civic action. To participate effectively, young people must be given the proper tools, such as information, education about and access to their civil rights. When empowered and given the right opportunities, youth are effective drivers of change.

International organizations such as the United Nations and the European Union recognize the importance of meaningful youth participation in decision-making processes at the local, national and international level. The UN has long recognized that young people are a major human resource for development and key agents for social change, economic growth and technological innovation. Participation in decision-making is a key priority area of the UN agenda on youth. In 1995, on the tenth anniversary of International Youth Year, the United Nations strengthened its commitment to young people by adopting the World Programme of Action for Youth (WPAY)\(^\text{13}\), an international strategy to more effectively address their problems and increase opportunities for participation in society. However, there is a need for a collective and better understanding of what youth participation involves, how it can be implemented for all youth ages. Furthermore, it is crucial to develop a set of verifiable indicators to complement the goals and targets developed to assess the progress achieved in the 15 priority areas contained in the WPAY. The full engagement of young people in society relies on the active participation and commitment of governments. It is only through meaningful involvement and active partnership, inclusive policies and decision making processes, that solutions to some of the key problems experienced by young people can be developed\(^\text{14}\).

The European Union has also developed a EU Youth Strategy which seeks to encourage young people to participate in the democratic process and in society. Ways in which this is being achieved include: developing mechanisms for engaging in dialogue with young people and facilitating their participation in the shaping of national policies; supporting youth organisations, including local and national youth councils; promoting participation by under-represented groups of young people in politics, youth organisations, and other civil society organisations; supporting ways of ‘learning to participate’ from an early age\(^\text{15}\).

\(^{13}\) UN Fact Sheet on Youth Participation http://www.un.org/esa/socdev/documents/youth/fact-sheets/youth-participation.pdf
Further steps need to be taken in this direction, in order to provide the necessary opportunities for young people to participate in decision-making processes.

According to the results of the survey disseminated in English in the frame of the Youth in Power project:

- 60.3% of the respondents in the English version of the survey think that the needs and opinions of young people in their country are not/not at all taken into consideration in the shaping of policies and legislation;
- 66.2% of them think that the opinions and needs of all the groups of the population in their country (including youth with disabilities, LGBTQI+ youth etc.) are not/not at all taken into consideration during the shaping of policies and legislation;
- 77.2% of the respondents indicate that they would like to get actively involved in the drafting of policies and legislation about Sexual and Reproductive Health and Rights of young people at national level;
- On the multiple answers question “Which of the actions below do you find most important in relation to SRHR in your county?” in relation with Youth Participation:
  - 63.2% chose “Development of educational programmes on decision making processes and on the importance of youth participation in such processes”;
  - 56.7% chose “Enactment of regular consultations with young people during the preparation of draft laws/policies”;
  - 46% chose “Enactment of a legal framework that will safeguard the participation of young people in the drafting of policies/laws”;
  - 43% chose “Enactment of youth representation in the Board of Directors of governmental, semi and non-governmental organisations”.
OBJECTIVE 1: ENACT A LEGAL FRAMEWORK THAT WILL ENSURE PARTICIPATION OF YOUNG PEOPLE IN THE DRAFTING OF POLICIES/LAWS

EXPECTED RESULTS:

1. Participation of young people in national programs and initiatives related to youth health issues
2. Participation of young people in the decision making process at the national, regional and international level
3. Regular consultations with young people for the drafting and adoption of policies/laws
4. Develop policies and programs to ensure the understanding of the importance of youth participation
5. Increase awareness of young people with regards to their importance as decision makers
6. Include SRHR in Youth Strategies & Policies

INDICATORS:

- Working groups on initiatives and national programs related to youth health issues will consist of at least 20% young people by 2025
- By 2025, the process of drafting and adopting policies and laws will include a step of providing the option to young people of open consultations about said policies and laws
- Educational programmes on decision making processes and on the importance of youth participation in such processes are developed by 2025
- Governmental working groups and programs working on youth consist of at least 30% young people by 2025
- Youth make up 30% of decision making processes and bodies by 2025
### YOUTH STRATEGY - ENDORSING ORGANIZATIONS

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>GEOGRAPHIC FOCUS</th>
<th>CONTACT DETAILS</th>
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<tbody>
<tr>
<td>YouAct</td>
<td>REGIONAL</td>
<td>Ivy Miltiadou, Chair of YouAct Steering Committee, (<a href="mailto:ivy@youact.org">ivy@youact.org</a> / <a href="mailto:info@youact.org">info@youact.org</a>)</td>
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<tr>
<td>YSAFE</td>
<td>REGIONAL</td>
<td>Simon Herteleer, Chair of the YSAFE Steering Committee (<a href="mailto:simonherteleer@hotmail.com">simonherteleer@hotmail.com</a> / <a href="mailto:ysafe@ippfen.org">ysafe@ippfen.org</a>)</td>
</tr>
<tr>
<td>Y-PEER</td>
<td>INTERNATIONAL</td>
<td>Sharafdzhon Boborakhimov, International Coordinator in charge of Advocacy &amp; Partnership (<a href="mailto:boborakhimov@y-peer.org">boborakhimov@y-peer.org</a>)</td>
</tr>
<tr>
<td>PETRI Sofia</td>
<td>REGIONAL</td>
<td>Yuliya Andzhekarska, Youth Coordinator (<a href="mailto:julija.urieva@yahoo.com">julija.urieva@yahoo.com</a>, <a href="mailto:petri.bulgaria@gmail.com">petri.bulgaria@gmail.com</a>)</td>
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<tr>
<td>ASTRA Youth</td>
<td>REGIONAL</td>
<td>Marta Paczkowska, Coordinator (<a href="mailto:info@astra.org.pl">info@astra.org.pl</a>)</td>
</tr>
<tr>
<td>Y-PEER Azerbaijan</td>
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<tr>
<td>Y-PEER Moldova</td>
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</tr>
<tr>
<td>Ponton Group of Sex Educators Poland</td>
<td>NATIONAL</td>
<td>Joanna Skonieczna, Youth Project Coordinator (<a href="mailto:jskonieczna90@gmail.com">jskonieczna90@gmail.com</a>, <a href="mailto:info@ponton.org.pl">info@ponton.org.pl</a>)</td>
</tr>
<tr>
<td>“Hamsol ba Hamsol” - Y-PEER Tajikistan</td>
<td>NATIONAL</td>
<td>Mekhribon Pulodi, Focal Point in Charge (<a href="mailto:pulodimekhribon@gmail.com">pulodimekhribon@gmail.com</a>, <a href="mailto:tajikistan@y-peer.org">tajikistan@y-peer.org</a>)</td>
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<tr>
<td>Y-PEER Turkey</td>
<td>NATIONAL</td>
<td>Dağlar Çilingir, Focal Point in Charge (<a href="mailto:cilingirdaglar@hotmail.com">cilingirdaglar@hotmail.com</a>)</td>
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<td>Teenergizer Ukraine</td>
<td>NATIONAL</td>
<td>Yana Panfilova - Founder of youth &amp; adolescent union “Teenergizer” (<a href="mailto:yanapo@teenergizer.org">yanapo@teenergizer.org</a>)</td>
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If your organization would like to endorse the above Youth Strategy for Sexual and Reproductive Health and Rights for Council of Europe and Central Asian countries, please contact YouAct’s Coordinator - Ana Rizescu - at ana@youact.org.
As part of the project, members of the Youth in Power team organized both an advocacy and a communications strategy with the objective of disseminating the strategy in Europe and Central Asia. This was done with the purpose of raising awareness of the creation and dissemination of the strategy as well as ensuring that SRHR of young people was brought to the heart of organizations all over Europe and Central Asia.

ADVOCACY WORK PLAN

TEAM MEMBERS: Jelena Lucija Brodnjak (CHOICE for Youth and Sexuality, The Netherlands), Eimear Sparks (YouAct, Ireland), Saadat Abdullazada (Y-PEER, Azerbaijan), Sharafdzhon Boborakhimov (Y-PEER, Tajikistan)

The advocacy Work Plan including aspects that were vital to the drafting of this document and which will aid in the future dissemination. These include:

- Compiling conventions, frameworks and other relevant documents, identifying who has signed and ratified these.
- Creating a Google Drive folder as a database of relevant documents for advocacy actions (https://drive.google.com/drive/folders/0B_lea7hVvT6DvZnUjcwdmPLR1k);
- Develop a one pager and an overall statement for i) EU and international NGO’s ii) National Actors
- Draft a Joint Statement based on the preliminary results of the strategy
- Arrange meetings with our organizations to inform them of the strategy and the findings
- Arrange Round Table discussions
- Contact Local Politicians and youth branches of Political parties
- Contact Civil Society Organizations
- Contact the President of the Youth Parliamentary Council
- Organize meetings with EU representatives and MEPs
- Establish a Global Campaign for awareness raising and encouraging various actors to use the strategy as an advocacy tool
COMMUNICATION WORK PLAN

TEAM MEMBERS: Joanna Skonieczna (ASTRA Youth, Ponton Group of Sex Educators, Poland), Simon Herteleer (YSAFE, Belgium), Despina Dimitrova (YSAFE, H.E.R.A, Macedonia), Jewgienia Aleksandrowa (Ponton Group of Sex Educators, Poland), Chris van Hoorn (CHOICE for Youth and Sexuality, The Netherlands)

Various elements were identified by the communications working group. These include:

- Establishing a contact list
  - Status: Completed based on a contact list used for a previous project by YouAct

- Sending 3 emails for the announcement of the strategy: the first, one month before the dissemination, the second, one week before dissemination and the last, one day before the announcement

- Creation of a Facebook page - https://www.facebook.com/Youthstepup/ and creation of an event to mark the launch of the strategy

- Organizing a “Youth in power” logo development contest
  - Status: Following online voting, the logo designed by KINDA GHANNOUM (young person from Syria, currently living in Poland) has been chosen.

- Use of a Hashtag for a twitter and Facebook to reach more people
  - Status: Current Hashtag Proposals include: #youthinpower, #youth #ECAYouth

- Creation of a Facebook frame people can use for their Profile Picture before, during and after the launch

- The team tried contacting possible social media partners (Facebook, Snapchat, Google) but did not receive any response

- Hosting a Webinar after the launch to share information on the background, creation and results of the Youth Strategy

- We explored the possibility to establish a website but due to logistical reasons this will only be available after the launch of the strategy. Once a website is launched a designated tab will be included for the strategy. In the meantime we have urged our partners to share it on their websites and social media channels.
ACKNOWLEDGEMENTS

The “Youth in Power” project was conducted through a joint partnership of the following youth organizations operating in Europe and Central Asia: YouAct, YSAFE, Y-PEER, the PETRI-Sofia Center, ASTRA Youth as well as their national level counterparts. Youth representatives contributed with valuable and constructive suggestions during the planning, development and finalizing stages of the project. The overall support and close collaboration of all partners brought wider reach and effectiveness. Special thanks go to YouAct, in particular to its Coordinator, Ana Rizescu, for taking the leadership to conduct this project and for contributing with volunteer time to organize the Kiev meeting, to ensure follow-up and glue all the different project pieces together.

We would like to acknowledge the financial support provided by Council of Europe’s European Youth Foundation (EYF), UNFPA Eastern Europe and Central Asia Regional Office (UNFPA EECARO) and the International Planned Parenthood Federation European Network (IPPF EN).

We also want to thank all the participants and the regional and national organizations they represent, who - through their participation in this process – contributed to the project outcomes and the development of the Youth Strategy for Sexual and Reproductive Health and Rights for Council of Europe and Central Asia.

The design of this publication was made with the support of Kinda Ghannoum.

For more information, please visit www.youact.org

Published – March 2017
## LIST OF PARTICIPANTS
Youth in Power: Developing a Youth Strategy for Sexual and Reproductive Health and Rights for Council of Europe and Central Asian countries

### STUDY SESSION
3-6TH DECEMBER 2016, KIEV, UKRAINE

Guests (joining the project team for selected sessions)
- Julia Danyltsova, YSAFE, Ukraine
- Anna Postovoitova, YouAct, Ukraine
- Anna Miller, Teenergizer, Ukraine
- Lesia Kharchenko, Amnesty International, Ukraine
- Soldado Kowalisidi, Amnesty International, Ukraine
- Anja Pederson, YSAFE, Denmark
- Rune Brandrup, UNFPA Eastern Europe & Central Asia Regional Office

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<tr>
<th>FULL NAME</th>
<th>NAME OF YOUR AFFILIATED ORGANIZATION / NETWORK</th>
<th>NATIONALITY</th>
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<tr>
<td>Aikanysh Eralieva</td>
<td>Reproductive Health Alliance of Kyrgyzstan</td>
<td>Kyrgyz</td>
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<td>Alen Kuspanov</td>
<td>Y-PEER</td>
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<td>Anuki Mosiashvili</td>
<td>YouAct &amp; Y-PEER</td>
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<td>Yuliya Yurieva Andzhekarska</td>
<td>International Training and Research Institute PETRI-Sofia</td>
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