A Time Between

Health, Sexuality and Reproductive Rights of Young People

UNFPA
United Nations Population Fund
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The impending demands of adulthood make adolescence a time of intensive preparation. Success depends greatly on the health care and basic education provided during these fleeting years. For young women, greater control over sexuality and reproduction may benefit every social and economic aspect of their lives.

The United Nations Population Fund (UNFPA) responds to adolescents in the context of their overall life situation, supporting activities that address their holistic well-being and help achieve their full potential. UNFPA recognizes that young people’s education, health and life opportunities will determine the world’s economic and social prospects in the 21st century.

UNFPA activities encompass global events such as the World Youth Forum and focus on specific issues ranging from girls’ rights to violence against young people. Research studies are undertaken so that data will be available for countries designing youth policies and programmes. UNFPA also supports population education for youth in schools and out of school. Training for peer educators and counsellors is part of many UNFPA-supported projects, which endeavour to reach young people whether they are male, female, married or unmarried. Guided by the Programme of Action of the International Conference on Population and Development (ICPD), UNFPA strives to expand life options.

“UNFPA gives high priority to our work with and on behalf of adolescents. We work with youth organizations, with parents, with communities, with policy makers and with political leadership at all levels. Our aim is to promote adolescent reproductive health and rights in line with the ICPD Programme of Action, and to ensure that young people have the attention and priority they deserve.”

- Dr. Nafis Sadik, UNFPA Executive Director
A 14-year-old girl in Jamaica tells her friends to delay sexual relationships until they are older. “Think before you act. Sex has more disadvantages than advantages at our age. It won’t kill you to wait,” she says.

A teenager in Ghana explains why adults do not seem to be his allies: “I feel embarrassed and uncomfortable talking to adults because they may tell someone else about you or judge you.”

Early marriage worries a young woman in Sri Lanka: “Getting married when you are young is only good if you know what you are getting into since marriage is a serious commitment.”

Standing at the brink of a future filled with possibility, on the verge of maturity, young women and young men encounter the risks, responsibilities and opportunities of adulthood. If they are lucky, lessons learned in childhood will serve them well. Sound decisions and the ability to act in their own best interests will protect them—and caring adults will continue to support, guide and give young people what they need to stay safe and healthy. But many adolescents are not this fortunate. Millions of teenagers lack the information and services to help them prevent unwanted pregnancy, abortion and sexually transmitted disease.

From one day to the next, a future of promise can be lost. That loss is a tragedy for the individual and for society as well, which suffers when potential fails to be achieved. Consider collectively the impact of 15 million teenagers giving birth each year, many of them with bodies and minds far too young for motherhood. Consider, too, that half of all new HIV infections are among young people: five people between the age of 10 and 24 every minute.

The time between childhood and maturity is a time of rapid change when adolescents may be caught up in events but lack the tools to control what is happening. When unprotected sex happens too early, the consequences can be severe—as the families and friends will recall of girls who have died in childbirth or whose unwanted pregnancies led to unsafe abortions.

**Areas of opportunity**

**Young people:** Most promising of all the resources required to improve life for young people—today and in the future—is the energy, intelligence and enthusiasm of young people themselves. At 1.04 billion, today’s is the biggest-ever generation of young people between 15 and 24, and this age group is rapidly expanding in many countries. The world has an unprecedented opportunity to benefit from their energy and ambition.

At age 15, Jennifer, is a committed activist for the needs of youth: “Among the lessons I have learned is that we should speak for ourselves, but listen to others and realize that we are all facing the same problems. The resulting cooperation will lead to common solutions.”

**Address adolescent health issues**

The Programme of Action adopted at the ICPD in 1994 calls on countries to “address adolescent sexual and reproductive health issues, including unwanted pregnancy, unsafe abortion and sexually transmitted diseases, including HIV/AIDS, through the promotion of responsible and healthy reproductive and sexual behaviour, including voluntary abstinence, and the provision of appropriate services and counselling specifically for that age group...[in order to] substantially reduce all adolescent pregnancies.”

(Paragraph 7.44)
Until recently, adolescents were seen as a healthy segment of the population and received low priority for health services. But biology and society bring on additional health problems: those resulting from unprotected sex, violence and substance abuse. For many young people, services for “married only” come much too late. Today, people are reaching puberty earlier, marrying later and spending a longer time between childhood and adulthood. Young people—a group with special health needs—find their health needs neglected or ignored the world over.

Because so much of the developing world’s population is young—one third is under 15—population will continue to grow even if everyone in the world only replaces themselves. Fast population growth keeps many developing countries from escaping poverty, because economic growth cannot match pace.

But there is better news: the combined benefits of better education and better reproductive health services are tremendous. In poorer countries, people will live longer, have fewer but healthier children, and young people will be a smaller but more educated part of the population. The population momentum can be slowed significantly if young people are enabled and encouraged to have children later in life. For individual adolescents, reproductive health care protects both health and future.

If the millions of young people entering the workforce today can contribute fully to economic development, developing countries stand to benefit substantially. The education, health and life choices offered to young people today determine the economic and social prospects of all countries in the 21st century.

**Equal rights:** Women today generally have more choices than their mother’s generation had: in education, marriage and employment, as well as in family size and spacing. The benefits of schooling and wage work are striking: as women they are more likely to seek medical care, to maintain their family’s health, to have greater say in decisions affecting their lives, and to marry later with more resources and skills.

Still, too many girls have little or no say about what happens next in their lives. Cultural traditions may push them into early marriage and childbearing. Some may be forced into bad situations or behave in ways that society looks down on. Most discover that their brothers have a lot more control than they do over decisions that shape the future: education, employment, sexual relationships, marriage, having children.

Many girls and young women know they have a right to all of life’s options and opportunities and are taking charge of making change.

Toyosi, 16, says her work as a peer educator in Nigeria has shown her that “we can become anything we want to be, how to take care of ourselves as girls and how to interact with people,

### Numbers Show Need for Sexual and Reproductive Health Services

- There are more young people than ever before, 1.04 billion worldwide and nearly 900 million in developing countries;
- 15 million young women between age 15 and 19 give birth each year;
- Many of their pregnancies are unwanted, and many result in abortion, yet only 17 per cent of the age group use any form of contraception;
- One in 20 adolescents contracts a sexually transmitted disease each year; half of new HIV infections are among young people.
including boys. We watch films and know all about sex and pregnancy. I know my body very well."

**Education:** Education provides young people with the skills they need for adult life, from the basic skills needed for future employment to the skills that make it possible to respond to life’s challenges, to make sound decisions and to feel self-confident.

Girls need these skills as much or more than boys do. But domestic work or parental fears about protecting their “virtue” sometimes prevent girls from attending school. They miss out on learning skills they could use to earn a better living or to take control of their lives: no math or reading lessons, and certainly no learning about sexuality and reproductive health.

Parents and teachers and trusted older family members can be among the best sources of information and the strongest advocates of girls attaining education. Yet most young people say they find it awkward or impossible to discuss their concerns at home. “Start talking to us early,” teens say, before sex is a big deal.

**Reproductive health information and services:** "Reproductive health is universally accepted as a human right," says Dr. Sadik of UNFPA, “and this right extends to young people. Now, we have to work to make sure that reproductive health is a reality for all the world’s young people."

Accurate information and accessible health care services are rarely to be found when adolescents need them most. Obstacles to sex education also get in the way of young people’s ability to take charge of their health, whether they are married or unmarried. Such information and services are the right of all young men and young women, and it is the responsibility of adults to protect this right.

Overcoming adult reluctance to provide information and services is a prerequisite to progress. While approaches must consider the force of tradition, morality and religion, the common ground for parents is a concern for the well-being of their children, who are so quickly changing into young women and young men.

Complicating the situation is the reluctance of many adolescents to use health services. They may not realize they need medical help or know that care is available, where they can go, how much it costs, and whether they would be treated with respect and confidentiality. When asked, “youth-friendly” services are what young people say they want.
Empower Girls to Delay Pregnancy until Physical and Emotional Maturity

Mona quit school when she was 9 years old. She was clever and liked to laugh with her school friends, but her parents wanted her home to look after younger sisters and brothers. At the age of 14, Mona married a boy of 17 from her village in Nepal. Stories about sterilization frightened her, so she "let God decide about the number of children" she would deliver.

Mona may not have known the dangers of early pregnancy. Childbearing is much more dangerous for women under 18 than for fully grown adults—and for their children, too, who are more likely to fall sick or die in infancy. Access to obstetric care can help, but the combination of immature bodies, poverty, lack of education and lack of access to medical care are factors that greatly increase the risks.

Would young women choose to take such risks? Many would not, if given the choice. When she was pregnant with her seventh child, Mona met her long-ago classmate, Hari, now 20, in the street. He believes Mona never had any control over her own life. “If Mona were given the opportunity of education to build a future she would not become the slave of tradition and the society. This would lead to greater independence and higher quality of her life,” he says.

Lower status means higher risk

Negotiation for safer sex and contraceptive use is difficult for many young women—married or not—due to their low status in society. Lack of power also leaves them vulnerable to sexual abuse, including incest and rape. Low economic status makes young women needing money for school books or other essentials easy prey for “sugar daddies” and prostitution. The most vulnerable and the least powerful are girls who are disabled, homeless, caught in the turmoil of war, or in other ways on the fringes of society.

Young women learn their status from the start.

Carolina, 18, says that in Guatemala boys are seen as better than girls from birth. “When it’s a boy, everyone is very happy and there is the famous expression ‘se ganó la gallina,’ which is roughly the same as saying ‘you won the lottery’; yet when it’s a girl, people say with satisfaction but less fanfare, ‘Now your home’s little servant has been born.’”

In many places, negative attitudes and prejudices hold back moves to help adolescents. This is especially true for girls. Traditions such as mutilating girls’ genitals are symptoms of wider prejudice against women.

Shana, 22, of the United States, says young women with disabilities encounter constant challenges to their participation in society: “Special attention should be paid to the situation of disabled girls and women, since they often face double discrimination—for their gender and for their disability.”

Learning more about the rights of women and girls is part of helping people understand more about gender equality. These rights are spelled out in laws and declarations agreed to by nearly every country in the world in one form or another, as in the Convention on the

**Reasons for Urgent Action**

- Girls aged 10-14 are five times more likely to die in pregnancy or childbirth than women aged 20-24;

- 5 million women aged 15-19 have abortions every year, 40 per cent of which are performed under unsafe conditions;

- Every day at least 4,000 people under age 25 are infected with HIV, mainly in parts of Asia and sub-Saharan Africa.

(Generation 97, IPPF and UNFPA)
Elimination of Discrimination against Women and in the Convention on the Rights of the Child.

Such statements are important, but seem far from daily life for Rim, a 15-year-old from Tunisia: “The gap between the good intentions put down in texts and the reality lived by the majority of women is still enormous.”

More positive attitudes towards girls and women will result in better health, education and opportunities to succeed.

Mwimpe, 19, is starting the process with her boyfriend in the Democratic Republic of Congo, to whom she exclaimed, “Look at me, man! I am your colleague, your foil, your companion and your equal partner in all human endeavours and achievements.... As long as I am prevented from realizing my fullest potential, you won’t be able to realize yours.”

When young women can control their sexual and reproductive lives, they will be able to contribute more to development. They will be empowered to exercise their human rights more fully. Meanwhile, Mona and young women in almost every part of the world continue to bear the heavier burden of discrimination and risk.

Meet the needs of young women

“The International Conference on Population and Development endorsed these objectives: “To meet the special needs of adolescents and youth, especially young women, with due regard for their own creative capabilities, for social, family and community support, employment opportunities, participation in the political process, and access to education, health, counselling and high-quality reproductive health services.” (ICPD Programme of Action, paragraph 6.7)

“...improve the welfare of the girl child, especially in regard to health, nutrition and education.” (paragraph 4.16)

Lively Videos Urge Girls to Delay Pregnancy

In the Philippines, a video spiced with new music is reaching adolescent girls with timeless advice: protect yourself. Featuring a popular song by Alanis Morisette, the video tells the story of a teenage girl in distress over her unplanned pregnancy.

Another video was carefully crafted to reach adolescent girls of the indigenous people of Kalinga, Ifugao and Apayao. The culturally-sensitive documentary, entitled The Legacy of Mai-Mai, encourages adolescents, both female and male, to pursue an education as an investment in the future rather than following the tradition of early marriage.
Young women like Melissa, a 14-year-old from Jamaica, know what they will say when young men go too fast: “If Mr. Stallion can’t accept your decision, you can know you will have a brighter future to look forward to; one that omits him. You will find someone else in time, hopefully a guy who has your best interest at heart.”

Young men like Alonzo, who practices abstinence, wonder if they are in the minority. “Maybe it is appropriate to say that I am one of those vanishing or endangered species of persons who are committed to preserving the value of conservativeness; the value of the sacredness of sex,” says the 20-year-old from the Philippines.

Both Melissa and Alonzo are doing their best to cope as sexual beings. They know that adolescence often means shame and pregnancy for girls, while boys are expected to focus on prowess and pride in proving manhood.

Boys are most often raised with different ideas and expectations than girls. That is not news to Carolina, 18, who dislikes the different treatment but worries that boys need more guidance then they receive.

“Boys can come home late, while girls can’t go out at night. Boys can go out without saying where they are going, while girls must undergo a big cross-examination before they go out. Not everything is bad for girls, however. So much freedom (for boys) can take them into the world of drug addiction, expose them to venereal diseases and many other things.”

Her worries are well-founded: in the United States, while fewer than one in three girls discuss reproduction, sexuality and family planning with either parent, the number of boys who do so is only one in six.

Monica, 16, says the lack of guidance is similar in her country, Peru. “Mothers are shocked when their daughters or sons ask them questions about sexuality. And I say ‘mothers’ because the majority of fathers never touch upon this subject with their sons, encouraged by the male chauvinistic belief that it is the mother’s job to look after the children while they themselves only have to bring home the money.”

Jean Marie, 23, who sees the impact of HIV/AIDS in Uganda, believes that girls who are taught about human sexuality by their aunts are luckier than boys left to learn from experience. Honest communication is hard to find for many boys, who play out social stereotypes to feel more like grown men and sometimes face harsh consequences.

Educate men to respect women and share responsibility

“Information and services should be made available to adolescents to help them understand their sexuality and protect them from unwanted pregnancies, sexually transmitted diseases and subsequent risk of infertility. This should be combined with the education of young men to respect women’s self-determination and to share responsibility with women in matters of sexuality and reproduction.” (ICPD Programme of Action, paragraph 7.41)

“Responsible sexual behaviour, sensitivity and equity in gender relations, particularly when instilled during the formative years, enhance and promote respectful and harmonious partnerships between men and women.” (paragraph 7.34)

Boys get the idea that raising children is a “female thing”, not much to do with males. Focusing on the relationship between fathers and children can encourage young men to be involved in family life. Likewise, understanding
the situations and pressures faced by boys and young men can make education and health services more responsive and effective.

Folade, a 20-year-old from Nigeria, says a family life education programme taught him a lot about life: “Even boys can now understand why a girl has to say ‘no’... I have learned so many things I didn’t pay attention to in my biology class.”

For their part, young men must take equal responsibility for safe and healthy sexual behaviour. This includes respecting the reproductive choices of young women, using contraceptives and accepting responsibility in case there is a child. There is a long way to go before many men take on this level of responsibility and accept the need for change. When society says it is time to do so, the changes will have an undeniably positive impact. More support from young men will lead, in time, to healthier and more prosperous families and better opportunities for young women.

Action in the Arab States for Male Responsibility, Adolescents and Refugees

Advocacy in the Arab States has led young men to be involved in events such as a five-day regional Arab Scouts Seminar hosted by the Yemeni Boy Scouts Association as part of the Youth-for-Youth initiative. The seminar’s topic: drug abuse and prevention of sexually transmitted diseases (STDs). In Yemen, 52 per cent of the population is under the age of 15 yet young people know little about preventing STDs or pregnancy. Less than 10 per cent of married women use any contraceptive method; studies show that more than 90 per cent of men are against family planning. To improve the situation, the Ministry of Youth and Sports of the Government of Yemen has been working with UNFPA since 1990.

Somalians who fled to Kenya to escape war are the focus of a UNFPA project that is training teachers, community health workers and peer counsellors to reach young refugees with information about reproductive health and services. Local nurses are also being trained in adolescent health needs in this emergency situation. Sexual violence against women, contraceptive use of only 4 per cent, and the prevalence of female genital mutilation and STDs are major threats to the well-being of young Somali refugees.

In Gaza, young men and young women are receiving training in reproductive and sexual health and reaching out to their peers in the community. The young male counsellors are particularly accessible to boys and other young men. While the training is provided as part of a UNFPA project serving all ages, the new emphasis on youth is providing much-needed information and helping link young people with the services they need.
Encourage Adults—Especially Parents— to Listen and Respond to Young People

The conversation shocked Aicha, a young girl in Morocco. She pretended to be asleep as she listened to her cousin and aunt discussing a date. Gently pressed by her mother for details, Samira admitted that kissing and cuddling had progressed to unprotected intercourse.

Aunt Khadija was furious. “Could anything apart from a condom block the path of the sperm? Didn’t I warn you a thousand times about ignorant girls?” she exclaimed. It did not matter to Khadija that her daughter was engaged to the young man. She talked about unplanned pregnancy and disease and Samira’s reputation, which would suffer if the relationship ended before marriage.

Aicha kept her eyes closed but could not keep her ears from hearing words that disturbed and embarrassed her and sounded immoral. Then, several years later, sitting under an apple tree and kissing a boy she adored, she froze. She needed to know the facts her cousin had been told.

Wishing she had a mother like Samira’s mother, Aicha spoke with her aunt: “I need to be told all the things you told her eight years ago. I love Saeed and he loves me, but I am afraid of what will happen to us. Everything is so complicated these days, and there are so many horrible diseases. I can’t talk to my parents about these things.”

Preparing young people for a new world

Concerned adults—often an aunt, older cousin or trusted teacher—can be among the most important sources of information and guidance for adolescents. Most adolescents are more interested in questions about relationships than purely sexual matters, and a trusted adult can be the best confidant. But for many the family structure has broken down and there is no one to replace the guidance of older family members.

Monica, a 16-year-old from Peru, explains how being young feels to her: “Very often, on reaching adolescence, people feel confused, weighed down, full of questions and doubts.”

Monica believes that, ideally, young people should be able to turn to their parents. Instead, they often turn to ill-informed friends who only add to the confusion. While adults around them are busy being angry, adolescents are afraid. Fear of censure, shame, embarrassment and guilt makes any problems worse.

Parents are often uneasy discussing sex, reproduction and related health concerns. It may seem safer to look towards an idealized past than to see young people as sexual beings. Or it may seem that the right thing to do is what has always been done. But the time has never existed when pregnancy occurred only in marriage, all pregnancy was wanted, and fidelity was protection from sexually transmitted disease.

Meanwhile, these not-quite adults are facing adult decisions under circumstances that often differ dramatically from the past. Collectively, these decisions impact the future for individuals, families, communities and countries of the world. Whether adults agree or disagree with changes in modern society, young people suffer if adults do not meet their practical needs.

Responsibility to empower young people

More adults need to act on their responsibility to young people, says Dr. Sadik of UNFPA: “The responsibility of the leaders, of the older people to the youth, should be stressed. We are always hearing of parents’ rights, without emphasis on youth rights. It is time that political leaders, the older generation and others lived up to their responsibilities to the youth.”

Empowering girls and boys to take more active roles in school, at home and in society can be a
challenge for adults. Parents and teachers may resist or feel hesitant. Yet parents, by recognizing children as active participants in their own lives, are helping prepare them to become responsible participants in society. It may be said that parents hold rights “on behalf of” children, rather than “over” their children. They are best placed to empower adolescents so they may enjoy their rights, especially to the information, education and services that will enable them to attain the highest standards in their own health, family life and future.

Most young people want the support of their parents. They watch and imitate the behaviour of adults close to them, share the same values, and gain self-esteem through feeling loved and respected. Adults who create a safe environment for children to ask questions and to seek knowledge and skills for succeeding in life are giving a valuable gift to the next generation.

Overcoming obstacles to dialogue

If adolescents need information, adults need the skills to convey it. At the World Youth Forum in Braga, Portugal, young people from 150 countries recommended that training be provided on support skills for parents, teachers, religious and traditional leaders and caregivers. Pointers on how to encourage adolescents to discuss their concerns would be useful to many adults.

Elmira, a 17-year-old from Kazakhstan, warns against a forceful approach: “Heavy-handedness, ‘brainwashing’ and moralizing will not stop young people from engaging in sexual activity.”

We want adults to demystify sex, young people say, and parents need to start early.

Nineteen-year-old Moshera from Egypt advises: “They must realize that the best way to educate their children in the future is from the very beginning. Young people must be given the facts, particularly with regard to reproductive health.”

Nadia, 15, from the Republic of Moldova, agrees. “The parents should prepare the child for his or her sexual life.... The discussions should be serious so that the child would understand that he will take the decision when and how to begin his sexual life and that this decision can change his life. But we have to admit there are many parents who are not prepared for this,” she concludes.

By participating in their children’s sex education, parents are more likely to see the value of health services some now oppose. Protecting adolescents when they become sexually active requires adults to provide sexuality education classes and health services to prevent pregnancies and

Rights, duties and responsibilities

“Recognizing the rights, duties and responsibilities of parents and other persons legally responsible for adolescents to provide, in a manner consistent with the evolving capacities of the adolescent, appropriate direction and guidance in sexual and reproductive matters, countries must ensure that the programmes and attitudes of health care providers do not restrict the access of adolescents to appropriate services and the information they need, including on sexually transmitted diseases and sexual abuse.” (ICPD Programme of Action, paragraph 7.45)

“... promote programmes directed to the education of parents, with the objective of improving the interaction of parents and children to enable parents to comply better with their educational duties to support the process of maturation of their children, particularly in the areas of sexual behaviour and reproductive health.” (paragraph 7.48)
STDs. In some cases, discussions with teachers and religious leaders can help parents find an appropriate approach. The objective is to provide information ahead of the developmental stage of the young people so they will know about the changes before they occur. This is especially important if parents want young people to abstain from or to delay sexual activity.

Overcoming obstacles requires a sustained commitment says Dr. Sadik: “Adolescent reproductive health has been, and continues to be, one of the most contentious and difficult areas in which to work, because of the sensitivities surrounding adolescent sexuality.” The biggest obstacle facing adolescents in exercising their right to reproductive health may in fact lie not in resources or delivery systems, nor infrastructures, but in the minds of other people.

Partnerships to Protect and Empower Young People

The Programme for Enhancing Adolescent Reproductive Life (PEARL) is expanding to reach 20 of Uganda’s 45 districts. PEARL’s goals also have broad reach: advocacy, awareness-building, provision of information and services. Its many activities share the same goal: to build a supportive environment and to empower adolescents regarding their sexual and reproductive health.

The programme’s development is a process that depends on the participation of diverse members of society. More than half of Uganda’s population falls within the area covered by this extensive reproductive health programme for young people. Social partners include young people themselves, government departments, community groups, NGOs, district authorities and donors—including UNFPA—providing support. A diverse network enables PEARL to disseminate its messages through the media, workshops, seminars, community meetings, village-level discussions, health services, recreational facilities, competitions, presentations at schools and churches, and peer education projects.

PEARL encompasses many areas of concern. Interpersonal communication is emphasized because parents often need encouragement and better skills in order to talk about sexuality with their children. The programme also enhances opportunities for education, recreation and training. PEARL provides reproductive health services through the health system and trains health personnel. Other areas of activity address negative issues such as sexual abuse and work to identify positive cultural practices. The entire effort is coordinated through PEARL, which maintains a constant flow of information among its many partners and works to integrate its many levels.
Do teenagers lead a carefree life? Of course not.” On the contrary, Mandkh-Aush, 23, of Mongolia says that a “mountain of problems” push young people to “desperate acts like taking overdoses, throwing themselves off buildings, abusing alcohol, prostituting themselves or leaving home.”

Cheryl, 17, from the United Kingdom, says inadequate education, restricted access to health services, and growing youth unemployment are among the global problems that must incorporate young people as part of the solution. “Youth today are subjected to injustice and exclusion due, in part, to increased inequities in access to government services and the frequent cuts in human services,” she adds. “They face an ever-increasing breach between the rich and poor due to uneven income distribution, unequal wealth and unbalanced power.”

Unhealthy dangers are many: sexual abuse, violence, exploitation, abduction, rape, incest, female genital mutilation, trafficking, abandonment and prostitution. What makes it so hard for young people to fight these threats to physical and mental health? The acts against them are committed by adults.

Unscrupulous adults exploit young people for profit. Every year, an estimated 2 million girls between 5 and 15 are drawn into commercial sex, and such exploitation increases the threat of violence. The sex trade, fuelled by poverty, speeds the spread of STDs including HIV/AIDS from customers to sex workers, sex workers to the next customers, and customers to their wives and girlfriends.

Although more and more tragic stories are surfacing these days, most are buried beneath layers of secrecy and shame. Genuinely sensitive methods are required to help young people report and discuss problems of an emotional and sexual nature. Instead, anxiety feeds on ignorance and shame. Recovery, if possible, is rarely complete and repercussions last a lifetime. At the least, a girl abused in early life will lose her sense of value later on.

Confront all forms of violence, abuse and exploitation

Sometimes strangers are to blame, but most problems are rooted closer to home. Rape victims often know their attacker: a friend, a family member, an acquaintance.

Preventing another kind of violence—domestic violence—starts at home during adolescence. Men who are violent against women start out as boys who are socialized into gender roles designed to keep men in power and in control. Rough-and-tumble games, impulsiveness and other traits typical of very young boys are not the problem. But that is a good time in life to start teaching young boys respect and responsibility. If nothing changes, the way many boys are raised today means women will be beaten tomorrow.

As if dangerous adults were not enough of a threat, through risky behaviour young people hurt themselves.

A letter from a teenage son to his mother, in an essay by Mandkh-Aush of Mongolia, 23, tells an all-too-common story: “I’ve been smoking for the past two years. You will never be able to accept this, of course. But the way things are at the moment, if I don’t smoke, everyone will think I’m a mommy’s boy, and even my girl will laugh at me. Right now I’ve got a problem which is harder to talk about.... The doctor says she’s pregnant.... She was so frightened that she suggested we should die together.”

Taking risks is part of growing up, pushing the envelope on childhood. A child who touches the stove to see if it is hot gets his fingers burned. He learns. A young man who feels he has nothing to lose takes risks to the level of self-destruction. The risks he takes range from breaking the law to practising unsafe sex.
Do teenagers lead a carefree life?

The adolescent urge to break away from rules and regulations is part of testing new independence. Ignoring consequences—and safety measures like condoms—seems part of the exciting life cool grown-ups lead. Peer-pressure can exaggerate the impulse to take risks, however. And societies worldwide do little to help, punishing delinquency like criminality and shunning teens whose experiments turn out all wrong.

Young people count on adults for support. They count on adults to create opportunities for them to develop their potential. By providing access to counselling, information, education and health services, adults can prove to young people that their trust will not always be betrayed.

Gifts and Celebration Replace Dangerous Rite of Passage

The Sabiny Elders Association was awarded the 1998 United Nations Population Award for dramatically curtailing female genital mutilation in its area of northern Uganda. The Association was formed in 1992, bringing together the elders of the 161 Sabiny clans to promote the development of the Sabiny, to preserve its language and its culture, and to improve the welfare of the Sabiny people. It has been actively promoting awareness of HIV/AIDS, the development of traditional medicine, children’s education and environmental conservation.

The Association’s most dramatic success has been its participation under a UNFPA pilot project in the REACH (Reproductive, Educative and Community Health) programme, which substitutes gift-giving and public celebration for the traditional practice of genital cutting as the rite of passage into womanhood. Through its culturally sensitive leadership, REACH has substantially reduced female genital mutilation.
Too much evidence proves that ignorance is dangerous. Statistics on pregnancy and disease show how vulnerable young people are. They will tell you themselves, if asked, as were Nadia, Adotoyo and Bradley.

“Adolescents, especially girls, often pay a heavy toll when they start having sex without knowing how to deal with it in a positive way,” says 16-year-old Nadia from the Republic of Moldova.

Adotoyo, 22, from Togo, says young people link the lack of education to their plight. He says, “We have no hesitation in singling out the lack of sex education as the most influential factor in teen pregnancy.”

Bradley, 16, from Western Samoa, equates risk with ignorance. “Everything we learn is taught to us, and we learn to be responsible about sex only by being taught. A child who knows nothing of the consequences of unprotected sex is most at risk,” he says.

But the antidote to ignorance—information and education—is often denied to adolescents. The number of adolescents without reproductive health information of any kind is estimated at over 100 million.

“The misconception is that sex education teaches people how to have sex, whereas it actually teaches young people about the development of their body, reproductive health, sexually transmitted diseases and contraceptives,” Nadia explains.

In other words, sexuality education (also called family life education or population education) is designed to help young people understand sexual changes as positive and natural aspects of their development, and not to encourage behaviour contrary to moral values.

Gabriel, 16, wants adults to understand that sex education is something teens need and want. “Believe me, the more accurate and proper information young men and young women get about physiology, the dangers associated with early sexual contacts, pregnancy, venereal diseases, the more responsibly they will behave towards themselves and their partners.”

Adults need to learn about sexuality as much as young people do, says a 22-year-old from Cameroon: “I think the people who need to be educated are parents and teachers. To talk to your kids about sex doesn’t mean that you are encouraging them to have sex. Instead it helps them sieve through the information they get from friends, allowing them to decide what is wrong and what is right,” he says.

Information is protection

For young people, information is protection.

“I really wish I had the proper education about sex and all beforehand,” says a young man from the United States. “I am carrying the HIV virus. I feel that the word has to get around that we all have to be extra careful now that this disease is spreading.”

Education programmes could go a long way to improve the situation. But some teachers are uncomfortable with subjects related to sexuality, some traditionalists and religious groups are vocally opposed, and school administrators fear the criticism of parents. The hope is that such obstacles to knowledge will lessen as the benefits of dispelling myths and misinformation are better understood.
Access to information and to education are rights that belong to young people as much as adults. Extra efforts must be made to reach young people who are not part of the formal education system. Many young people working to support themselves and their families may be in even greater need of information, education and reproductive health services than those attending school.

Young people, whether or not they are in school or out of school, deserve a chance to learn the basics.

Elmira, 17, of Kazakhstan says, “The most important thing that a teenager must realize and say to himself or herself every day, particularly those teen-agers engaging in sexual activity, is ‘I am worth too much to throw away what I have to offer.’”

Ignorance leaves children vulnerable. No one wants that. People from all societies share common goals about the health, well-being, happiness and full development of their children. Adults who want to act on behalf of their children’s rights will find ways to convey life-saving information. Different education efforts will take different approaches. All will be trying to reach young people who are facing situations their parents and grandparents never had to face. Just ask them.

**Sexual health education leads to safer sexual behaviour**

Sexual health education for children and young people promotes safe sexual practices and does not increase their sexual activity. That finding, in a review commissioned by UNAIDS (the Joint United Nations Programme on HIV/AIDS) and reported in October 1997, was based on the analysis of 68 research reports on sexual health education from diverse countries. The main conclusions were:

- Education about sexual health and/or HIV does not encourage increased sexual activity. This was affirmed by 65 out of 68 studies; the other three were regarded as having severe methodological limitations;
- Good quality programmes help delay first

**Different Kinds of Programmes Meet Diverse Needs of Youth**

Youth-friendly health care is among a variety of services provided at an increasing number of multi-purpose youth centres in Botswana. These accessible sites also provide information and counselling to enable young people to make responsible decisions about their sexual behaviour. Two programmes of the Botswana YWCA have received UNFPA support since 1994.

The Education Centre for Adolescent Women helps teen mothers complete their education with a one-year programme of study, counselling and day care. The aim is to prepare young women to obtain the certification required to enter secondary or vocational school.

The Peer Approach to Counselling by Teens (PACT) programme creates networks of peer educators in schools. Ten students and one teacher from each school participating in the programme attend a week-long workshop addressing human sexuality and skills such as problem-solving and decision-making that empower teens. After training, participants attend meetings every week to discuss current concerns. The young educators take practical messages to their peers: stay in school, delay having sex and—if already sexually active—use contraceptives to prevent pregnancy and the spread of disease.
intercourse and protect sexually-active youth from HIV. Sexual health education either delayed the onset of sexual activity, reduced the number of sexual partners or reduced unplanned pregnancy and STD rates;

- Responsible and safe behaviour can be learned;

- Sexual health education is best started before the onset of sexual activity.

The review, summarizing a large body of evidence, concluded that effective education programmes share certain features. They work from a focussed curricula, give clear statements about behavioural aims and clearly delineate the risks of unprotected sex and methods to avoid it. They use learning activities to address social influences and media influences and to enhance communication and negotiation skills. Effective education programmes also encourage openness in communicating about sex.

Young People Speak Out: Braga Youth Action Plan

More than 500 young representatives of organizations from around the world gathered at the World Youth Forum of the United Nations in 1998 and worked together to draft a plan advancing the involvement of young people in human development.

Representatives of youth NGOs, youth-related agencies and organizations of the United Nations system, and youth-related intergovernmental organizations adopted the plan on 7 August 1998 in Braga, Portugal. In the section on Youth, Health and Development, the World Youth Forum recommended:

- The formulation, review and implementation of an integrated national youth health policy addressing all major health issues including: sexual and reproductive health; HIV/AIDS; infectious diseases; substance abuse; nutrition and hygiene; harmful traditional practices such as female genital mutilation; sexual abuse; sexual exploitation; mental health; and occupational and environmental health.

- The provision of youth-friendly health services, counselling and especially reproductive health services that are comprehensive, accessible and participatory, to ensure the holistic well-being of all young people.

- Reliable research, monitoring and assessment concerning the health needs of young people with the full participation of youth and the widespread and interactive exchange of information addressing those needs.

- Peer-education training of young people in all spheres of life on life skills, and the training of parents, teachers, religious and traditional leaders and caregivers on support skills.

- The establishment of information centres run by youth and for youth.

Kofi Annan, Secretary-General of the United Nations, endorsed the Braga Youth Action Plan at the World Conference of Ministers Responsible for Youth, which was attended by more than 2,000 representatives from governments, NGOs, UN agencies and other intergovernmental organizations. On 12 August 1998, the Lisbon Declaration on Youth Policies and Programmes was adopted. It recognized that “youth are a positive force in society and have enormous potential for contributing to development and the advancement of societies.”
Provider Services That Suit Young People’s Situations and Concerns

“I would like [health professionals] to treat me with respect,” says a 21-year-old woman from Iraq. “They should respect my opinion and my problems. They should not neglect or underestimate any problem that might seem trivial to them.”

Young people need, want and have a right to sexual and reproductive health services. Ignoring their sexuality will not make their problems go away. It only makes them worse. It only leaves them vulnerable to unsafe abortion, unwanted pregnancy and sexually transmitted disease. That’s no way to protect a future of promise. In fact, young people themselves want to protect their own health and future.

Young people from 150 countries identified the kind of support they need to take care of themselves when they wrote the following list at the World Youth Forum of the United Nations System in 1998 in Braga, Portugal: “Youth-friendly health services, counselling and especially reproductive health services that are comprehensive, accessible and participatory, to ensure the holistic well-being of all young people.”

If these recommendations are acted upon, the world will see lower rates of pregnancy, decreasing birth rates, and increased knowledge about health and safe sex practices.

Today, however, the ability of young people to act on their own behalf is hindered by many forces. There are the major obstacles to development, including poverty, unemployment, gender discrimination, ethnic discrimination, and the impact of social change on the family and cultural support systems. In addition, some adults are opposed to important services. And, even where services exist, teenagers may hesitate to use them.

Sometimes young people are not welcome. As a young woman of 19 in India says, “I am not married. How can I go to a family planning clinic?”

Other times it just feels that way. A young woman in the UK worries that staff at the clinic will be “condescending or patronizing” and wonders if they could “just treat me with some dignity and respect”.

The reasons that keep young people away are as individual as they are. But there are some ways to make services more accessible. Convenient locations and hours, welcoming staff and reasonable prices—young people everywhere say this would help.

Adolescents’ right to reproductive health services

Acknowledging parental rights to provide appropriate guidance in sexual and reproductive matters, the ICPD Programme of Action (paragraph 7.45) goes on to state: “…Countries must ensure that the programmes and attitudes of health-care service providers do not restrict the access of adolescents to appropriate services and the information they need, including on sexually transmitted diseases and sexual abuse. In doing so, these services must safeguard the rights of adolescents to privacy, confidentiality, respect, and informed consent, respecting cultural values and religious beliefs. Countries should, where appropriate, remove legal, regulatory, and social barriers to reproductive health information and care for adolescents.”

Health service priorities of young people

At the World Youth Forum, young people detailed what they thought health policies and programmes should address. They specified sexual and reproductive health, HIV/AIDS,
infectious diseases, substance abuse, nutrition and hygiene, harmful traditional practices such as female genital mutilation, sexual abuse, sexual exploitation, mental health and occupational and environmental health. Such a list of concerns counters any idea that teenagers live in simple times.

In such a complex world, young people need services that treat them in the context of their life situation. Young people know what they want from health care providers:

- Be confidential
- Provide us with the information and services we need
- Accept us as we are—do not moralize or demoralize us
- Ask about and respect our opinions about services
- Allow us to decide for ourselves
- Make us feel welcome and comfortable
- Don’t judge us
- Provide services at a time and within the time we have available


In general, preventive services will provide contraceptives, counselling and testing. Sexually active adolescents need special family-planning information, counselling and services including intervention in case of disease. Young people need to know how contraceptives work, how to use them and how to negotiate their use with a partner. Those who become pregnant need prenatal care, postnatal care and support from the family and community.

Katherine, 19, from Ghana, suggests a comprehensive approach: “Health and counselling services should be made accessible to young people in schools, churches and health centres and these should be equipped with well-trained personnel who have the right information to help young people to have deeper and better understanding of their sexuality.”

At one time a young woman or young man may need preventive care, information, diagnosis, counselling or treatment. A range of services might be provided through a telephone hotline, peer counselling programmes, a health centre at a school, or a youth focal-point at a larger health facility. When young people try to take care of themselves, it is important that providers do not miss the opportunity to help with all of their health care concerns.

**A list of essential services**

“Reproductive health care in the context of primary health care should, inter alia, include:
- family planning counselling, information, education, communication and services;
- education and services for prenatal care, safe delivery and post-natal care, especially breast-feeding and infant and women’s health care;
- prevention and appropriate treatment of infertility; prevention of abortion and the management of consequences of abortion;
- treatment of reproductive tract infections;
- sexually transmitted diseases and other reproductive health conditions; and information, education and counselling, as appropriate, on human sexuality, reproductive health, and responsible parenthood.” (ICPD Programme of Action, paragraph 7.6)
Young People Taking Charge of Their Health

Young people are the organizers, educators and counsellors for a programme designed to help their peers take charge of their reproductive health. Run mainly by young people themselves, “Youth to Youth in Health” is credited with reducing the number of births to adolescent mothers from 21 per cent of all births in the Marshall Islands to 14 per cent over recent years. In 1996, the group became an NGO supported by the Government’s Ministry of Health and UNFPA.

Health education is a main focus of the programme, which has trained more than 340 peer educators and counsellors to convey information on contraceptives, sexuality and staying healthy. By the end of 1996, 50,000 “contacts” had been made with young people, families and communities—providing health education through person-to-person counselling, small group discussion and large outreach meetings. The topics they talk about range from how to avoid sexually transmitted diseases and HIV/AIDS to substance abuse to good nutrition. The young educators use music, dance, drama and video to combine local cultural elements with their health messages.

Services were expanded recently to include a youth health clinic with a UNFPA-sponsored registered nurse on staff, who is assisted by volunteer educators and peer counsellors. The clinic, set up in Majuro at the main centre of “Youth to Youth in Health”, offers services for family planning and reproductive and sexual health.

Girls in Urban Slums Become Health Guides for Their Peers

Conditions are difficult in Jabalpur city in Madhya Pradesh, India, but a programme that empowers girls to reach other girls with information on reproductive health and services is making a difference. Supported by UNFPA, the goals are to provide better medical care, improve maternal care and increase use of family planning and reproductive health services among young women living in the city’s slums. A study found that adolescent girls knew little about their bodies and that young people suffered from a lack of health services and the dangers of sexual exploitation, unwanted pregnancy and unsafe abortion.

Today, young community health workers assist in counselling, education and awareness-raising among in-school and out-of-school adolescents. They also provide referrals to the expanding and increasingly youth-friendly network of services, distribute contraceptives and talk with teachers and parents.
Involve Young People in Decisions Affecting Their Lives

Adults have a choice: Regard young people as problems or welcome them as partners. Young people themselves assert that they are part of the solution, as the introduction to the Braga Youth Action Plan, adopted at the World Youth Forum, proclaims:

“Young people can and should be a part of the solution to the problems in the world. Everywhere, young people and youth organizations show that they are not obstacles, but invaluable resources for development.”

By the time adolescents face life’s decisive moments—like saying yes or no to sexual activity—parents and teachers will have had many opportunities to prepare them. Too often, however, these opportunities will have been missed.

Being prepared to make responsible decisions as an individual comes from being involved in decision-making in the family and community. For this to happen, adults must take the views of young people seriously. The Convention on the Rights of the Child says that the young have a right to be prepared to participate fully in decisions affecting their lives.

Taking young people’s views seriously

Participation is about making real decisions in the real world. Inviting young people to participate is a long and gradual process. It often requires teachers to change the way they teach. Parents are asked to take a supportive role, encouraging young people to explore new ideas, express their views and, if appropriate, to take action in response to a concern.

Young people’s participation is also about honesty. Be honest about how far they can go, depending on their age and the cultural context. In development projects and programmes, for example, youth participation does not mean that teenagers get everything their way. They do, however, have a genuine impact on decisions.

In projects and programmes for sexual and reproductive health, young people may be involved as advisers and decision-makers from a project’s development phase to its implementation and evaluation.

Kadjika, a young woman from Togo, says that peer education is one way for young people to be involved. “We are convinced that if governments understand the value of sex education and if they provide education about contraception, health care, anatomy and physiology through schools and churches, they will make young people themselves into good educators within the community,” she says.

Partnership with adults

Adults who work with young people discover quickly how different one individual is from another. This sense of diversity among youth is valuable information for a project planner or government policy-maker. Adults are reminded to focus on the situation at hand. Young peoples’ situations vary dramatically: 6-year-old children

Actively involve youth

“Youth should be actively involved in the planning, implementation and evaluation of development activities that have a direct impact on their daily lives. This is especially important with respect to information, education and communication activities and services concerning reproductive and sexual health, including the prevention of early pregnancies, sex education and the prevention of HIV/AIDS and other sexually transmitted diseases.” (ICPD Programme of Action, paragraph 6.15)
asking embarrassing questions, 16-year-old boys pressured to abuse alcohol, young women pushed into marriage too soon, young men of one ethnic group fighting young men of another ethnic group. Concerns cross over into family and community life, from health into education, and from the personal into the political.

Few issues are simply “adolescent issues”. A list of challenges to young people reads like a list of challenges to human development. They live with the growing gap between the rich and poor; injustice and exclusion resulting from worldwide inequities in income, wealth and power; cuts in government spending in human services; xenophobia; racism; gender discrimination; and lack of access to education, information and health services.

Commitment. That is what young people need from governments, businesses and the international community. Financial resources are needed if young people are to realize their full potential. They also must be able to participate in decisions affecting their lives. Commitment starts by recognizing the young as actors in society today with a direct stake in tomorrow. This commitment will enable young people to become full and active partners in the development process.

No one should be left out. Making it possible for all young people to participate is part of the commitment. Young women and young men need to participate on equal terms. So do young people burdened by illiteracy, unemployment or discrimination based on disability, ethnicity or religious beliefs. Young people should participate in decisions taken today about the environment and resources of tomorrow. By organizing into groups, young people are often empowered to participate more effectively in political decisions and social policies.

Worldwide support for action

Like many other conferences in the 1990s, the ICPD in 1994, recommended much more active youth participation at every level of society. Governments, international agencies and organizations worldwide were called upon to work together with young people to improve health and development. Nations agreed that by the year 2015, reproductive health should be available to all, including young people.

Ideas for action are clearly spelled out in a variety of statements, from binding international treaties such as the Convention on the Rights of the Child to the widely accepted ICPD Programme of Action. There are clear ideas and common agreement on what needs to be done. There are also persistent obstacles due to the sensitive issues that cannot be ignored when young people are recognized as sexual beings. In the Braga Youth Action Plan, which was largely written by young people, optimistic words ring with hope and energy:

“Young people can and should be a part of the solution to the problems in the world. Everywhere, young people and youth organizations show that they are not obstacles, but invaluable resources for development.... Youth are building democratic leadership, civil society and social capital for the 21st century.”

These words will inspire adults who respect the voices of youth. They will know what to do: welcome young people as partners and invite their genuine participation in decisions affecting their lives. In so doing, children will learn the skills they need to cope with the modern world. In so doing, adults will be safeguarding the potential of young women and young men and protecting them during a crucial time in life. As for young people, they will have the health, schooling and life skills they need to fulfil their future of promise.
How Young People Are Making a Difference

Young people in the Caribbean are mobilizing to combat increasing levels of adolescent pregnancy and births to teenage mothers, earlier and unprotected sexual relationships, and alarming numbers of STDs among adolescents.

In Jamaica, the performing arts are applied to social issues by an award-winning ensemble named for a Yoruba word meaning “the strength, power and talent within”: ashe. With a diverse repertoire, ASHE draws on songs and dances with roots in Afro-Caribbean, traditional, folk, gospel, reggae and popular dancehall music. Its original educational musicals address such issues as HIV/AIDS, drug abuse, the environment and children’s rights.

The ensemble features 25 full-time professional performers. ASHE’s academy has enabled many hundreds of young people between the age of 9 and 25 to receive training in singing, dancing, acting and drumming. Among its many activities, ASHE produced a music video, “Choices”, advocating the empowerment of young women and their right to say “no”; a musical event entitled “Solid” that tells the story of a family confronted by teenage drug abuse and pregnancy; and “VIBES in a World of Sexuality” dealing with HIV/AIDS and other STDs.

In Venezuela, young people are reaching out to other youth through programmes on the radio, discussion groups, newsletters and theatre. AVESA (Asociación Venezolana para una Educación Sexual Alternativa) activities range from advocacy for prevention to the counselling on sexual and reproductive health and gender-based violence. AVESA has involved young people in creating meaningful messages for the media, notably in more than 70 radio spots and six videos for television broadcast. AVESA Juvenil is the youth volunteer group, where young people receive training to become health promoters and peer group trainers.

Young People as Advocates for Their Reproductive Rights

Last year in the Netherlands, students and working young people between age 16 and 25 joined together and started a group, the Dutch Council on Youth Population, dedicated to promoting the sexual and reproductive rights of young people in all parts of the world. At home in the Netherlands, the Council works with other youth organizations, tours schools and participates in youth events. The group aims its messages at prominent policy makers by engaging in public debate, and attempts to create awareness about the need to take action to protect the sexual and reproductive rights of young people everywhere. Members will participate in the next World Youth Forum of the United Nations. This will be an opportunity to promote the rights of young people at the international level.
Types of Action Young People Can Take

Young people are taking an active part in meeting needs related to population and development. In the Cairo Youth Declaration on Population and Development, September 1994, more than 100 young participants articulated their commitment to actions such as the following:

- Promoting peer education through workshops and seminars and through vocational, leadership and organizational training;
- Involving, motivating and educating peers through artistic activities such as music and drama;
- Implementing peer counselling and awareness-raising through one-on-one interaction, group discussions, newsletters, newspaper columns and radio programmes;
- Creating jobs for peers through cooperatives and businesses;
- Educating parents and other members of the community;
- Lobbying local, national and regional governments and businesses, banks, the media and inter-governmental structures;
- Creating networks of interpersonal support, information sharing, cooperation and inter-organizational collaboration.

Sources


UNFPA. 1997. UNFPA and Adolescents.


