

UNFPA Eastern Europe and Central Asia

Regional Conference – May 9-11, 2011

Investing in Youth: Path to Accelerated Development

Concluding Document

Introduction

This document reflects conclusions and agreed policy actions from the Eastern Europe and Central Asia (EECA) Regional Conference, **Investing in Youth: Path to Accelerated Development**, organized and hosted by UNFPA EECA Regional Office (EECARO). Held in Istanbul from 9-11 May, 2011, the Conference draws on the decision of the United Nations General Assembly in proclaiming the Year of Youth from August 12, 2010 to August 11, 2011. The Year of Youth seeks to increase commitment to youth, promote youth participation and enhance inter-cultural and inter-generational dialogue and understanding among youth, contributing to the achievement of internationally agreed upon development goals, in particular, the Millennium Development Goals (MDGs).

Bringing together governments, parliamentarians, youth leaders, international organizations, non-governmental organizations, civil society, and academicians from 27 countries¹, the conference aims to take stock of achievements, lessons learned and remaining gaps throughout the region with regard to youth issues; identify programmatic priorities for addressing the rights and needs of young people in the regional context in line with the International Conference on Population and Development (ICPD) Programme of Action (PoA) and; elaborate policy actions to move the youth agenda in the region forward in compliance with the ICPD agenda and the World Program of Action on Youth (WPAY).

The Conference recognizes that the situation of youth in the EECA region is dynamic and complex. European Union (EU) accession and pre-qualification serve as major policy drivers for a number of countries in the region, contributing to a dynamic interface between regional and national youth priorities. Rapid development and changing geo-political systems in many countries further create challenges for civil society engagement and youth representation in leadership and policy development.

Poor economic growth in a number of countries has constrained the ability of the labor market to absorb the significant numbers of young people who are entering the workforce for the first time. Average regional unemployment rates for youth are among the highest in the world. Young women and ethnic minorities are particularly vulnerable to unemployment and are over-represented in the less stable, grey economies. The region as a whole is characterized by rising illiteracy rates and an overall reduction in school enrolment, especially among girls. Continued marginalization of Roma populations within education systems are of utmost concern.

¹ High-level Government Officials and technical experts (academia, youth, parliamentarians, civil society, NGOs, international organizations) from Serbia, Albania, Bosnia and Herzegovina, Bulgaria, Romania, Kyrgyzstan, Azerbaijan, Georgia, Moldova, Belarus, Ukraine, Armenia, Turkmenistan, Tajikistan, Turkey; Technical experts from: Macedonia, Uzbekistan, Slovenia, Kazakhstan, Russia, Cyprus, Poland, UNAP Kosovo, Italy; Youth members from Youth Peer Education Network (Y-PEER), YSAFE, YouthRise, YouAct, European Youth Forum, Y+ Programme, IFMSA, ASTRA Youth, and Slovenian Youth Council. UNESCO Regional Office Moscow, UNICEF CEE/CIS Geneva, WHO Geneva, IPPF Europe, AFPPD, EPF, ICC Turkey, UNDESA, BZgA Germany, Mutakalim FBO Kyrgyzstan, PETRI Center Bulgaria, Center for Population Studies Moscow, New School USA, Hacettepe University Ankara, European Youth Center Belgrade, UNAIDS Moscow, ILO Turkey, UN Women Slovakia. (full list of participants attached as Annex)

Health status among young people in the region is compromised by insufficient education and awareness of healthy SRH behaviours, and by increased risk-taking coupled with low health service seeking behaviours and poor access to youth-friendly preventive and curative services. Incidence of HIV in the region is the fastest-growing in the world, driven largely by increases in injecting drug use, and transactional sex, particularly among youth. Sexual transmission of HIV is increasingly a concern throughout the region, as is the rising incidence of sexually transmitted infections. While abortion and contraception may be widely available to adults, access to services in appropriate settings for youth is highly limited. The private sector is understood to be an increasingly important source of services for youth.

Sex work resulting from poverty or to support drug dependence and trafficking of girls and young women (and in some cases boys and young men) are reflective of broader health concerns. Use of hard drugs has increased significantly, as has use of alcohol and tobacco, particularly among girls/young women. Gender based violence is thought to be widespread, and targeted violence against sexual minorities, and bride kidnapping are reportedly on the rise in some countries.

Commitment to the development and promulgation of policies to address young people's needs varies widely across the region. Policy formulation processes are constrained by ideological and political factors and by resource limitations. Policy analysis, development and adaptation are compromised by the non-specificity of data generally and in particular, the non-availability of age- and sex-disaggregated data. Rigorous evaluation of the impact of youth policies and programmes is highly limited. To address this challenge the governments encourage establishing national, regional and global partnership on youth issues ensuring exchange of best practices and effective implementation of youth policies.

It is against this backdrop that the three conference themes are considered:

Theme I: Youth Counts

While there is increasing attention to the situation of youth at regional and national levels, the Conference highlights the crucial need for specific, informed, cross-sectoral policy focused on youth. Increased social investments in young people's health, education, and employment can enable countries to build a foundation for sustainable growth and development, with the potential to break the cycle of intergenerational poverty, decrease gender disparities and bridge diverse segments of society.

Most countries in the region have elaborated specific youth policies, drawing to varying degrees on evidence-based approaches to policy making, and of underlying commitments to youth development and rights. The participation of youth as actors in policy formulation is increasingly understood as a critical investment in the quality of policies themselves, as well as an investment in the future generation of leadership. Within the region, participation of youth varies considerably from country to country depending on historical, political and cultural factors – and depending on the critical role of youth in recent political transitions. While improvements in policy making processes are evident overall, there remains significant risk that youth participation is approached as tokenistic, rather than developmental and productive.

The Conference calls upon policy makers to:

Build an evidence base on the impact of integrating youth issues in national policies			
Recommendation	Actions	Who should lead	Timeframe
1. Build evidence on the impact of	1. Integrate youth issues into	Government,	2 years

<p>integrating a youth perspective into sectoral national policies as well as on the impact of integrated multisectoral youth policies through an integrated approach.</p>	<p>national statistics and households surveys as well as into sectoral policies (youth based approach)</p> <ol style="list-style-type: none"> 2. Undertake cost-benefit analysis of the impact of youth policies 3. Ensure inter-sectoral collaboration between different government units responsible for data collection (disaggregated by age and gender) 4. To allocate funds for youth statistic and research 	<p>Parliament</p>	
<p>Various modalities of integrating youth in national development policies</p>			
<p>Recommendation</p>	<p>Actions</p>	<p>Who should lead</p>	<p>Timeframe</p>
<p>2. To develop a national policy framework for addressing youth issues, including both legislation and regulations</p>	<ol style="list-style-type: none"> 1. Conduct legal analysis of existing law and mapping of youth policies 2. Advocate and draft law on Youth guided by international and regional commitments and guidelines, e.g., 	<p>Government, parliament, NGOs, Youth organizations</p>	<p>2-5 years</p>
<p>3. Create and ensure stable structures/institutions that deal with youth on national and local levels. Such structures should be presented in the national parliament and in ministries</p>		<p>Government Parliament</p>	<p>2 years</p>
<p>4. Support development /strengthening of structures that represent youth in the decision making process - at national and local level.</p>	<ol style="list-style-type: none"> 1. Support creation of a forum (innovative approaches) where youth issues can be discussed 2. Promote co-management structures (decision makers and youth). 3. Share good practices and process from other countries (e.g., Moldova) 4. Document good practices on youth related programmes and conduct evidence based advocacy 5. Build representatives youth structures at local, regional and national level 	<p>Government Parliament</p>	<p>2 years</p>

Funding of youth policies (resource allocation, sources, mechanisms)			
Recommendation	Actions	Who should lead	Timeframe
5. Governments should prioritize access of young people to better services and information	<ol style="list-style-type: none"> 1. Remove legal barriers which might restrict access to services; 2. Invest in improving the quality of education, vocation training and in the creation of employment opportunities; 3. Encourage enterprises to employ more young people through economic incentives and consultative mechanisms 4. Ensure greater correspondence between labor market needs and the aspirations of youth through educational reform, job creation and greater social dialogue 	Government, Parliament Local authorities Private Sector	2-3 years
6. Increase public budgetary allocations for youth needs	<ol style="list-style-type: none"> 1. Ensure appropriate budgetary funding for youth, through meaningful youth participation in the budget formation process 2. Advocacy for funding in youth and society development 3. Awareness raising on available services (E.g.. education, health, employment, sport) for young people 4. Expand the Public Private partnership and private sector engagement in addressing youth related issues. 	Government, Parliament Local authorities Private sector Civil Society	2-3 years
National ownership and accountability for implementing youth policies			
Recommendation	Actions	Who should lead	Timeframe
7. Expand and support the role of youth civil society organizations for greater impact on sectors affecting youth, including serving as a watch-dog for implementation	<ol style="list-style-type: none"> 1. Systematic engagement of youth in policy dialogue and development of national strategies 	Youth organizations, CSO, GOV, international org	2-5 years

8. Monitoring and evaluation of youth policies, indicators should be based on country assessment	1. Development of robust indicators harmonized for all sectors affecting youth, to ensure greater regional and international comparability	Parliament, GOV, Youth organizations, CSO	2 years
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Theme II: Healthy Youth, Healthy Society: Now and in the future

Support from national governments for promoting the sexual and reproductive health (SRH) of young people varies widely across the region. Access barriers reflect social discomfort with the realities of youth behaviour, inadequate health system responses to young people's needs as well as overarching discrepancies and vagaries in legal frameworks related to youth autonomy in seeking services. With noteworthy exceptions, traditional values about youth sexuality and pro-natalist tendencies of some governments combine to create a generally unsupportive environment for expanding access to SRH services for youth.

Most countries have taken steps to introduce specialized youth-friendly clinical services within mainstream facilities serving adults, or to provide services in stand-alone sites serving young people exclusively. On the whole, however, young people in the region still face significant legal, institutional and cultural barriers to accessing core SRH and HIV prevention services, particularly most-at-risk groups. Cost, and high reliance on out-of-pocket payments for youth health services persists as an important barrier to accessing services in both public and private settings. Inappropriate designation of service hours, lack of age-appropriate counseling and educational material, and non-adapted technical standards compromise quality and uptake of youth services. Significant need exists for outreach and mobile health services for young people. These constraints in access to youth friendly SRH and other social services are particularly acute for most at-risk young people such as those using drugs, or engaging in transactional sex, or same sex relations.

The Conference calls upon policy makers to:

Recommendations	Action	Who takes a lead
1. To promote and accelerate development of Youth-friendly Health Services based on assessment of youth needs and accordance with the human rights	1. Adapt international standards on Youth-friendly Health Services and establish comprehensive package of Youth-friendly Health Services (including counseling, medical and psychological support) 2. Assess and scale up effective models of Youth-friendly Health Services 3. Integrate Youth-friendly Health Services into primary healthcare facilities 4. Establish linkages among Youth-friendly Health Services and other services such as HIV	Relevant ministries, Parliament, civil society

	<p>prevention, family planning, harm reduction programmes, where appropriate</p> <p>5. Raise awareness of communities to support access of young people to health services</p>	
<p>2. Eliminate legal and institutional barriers to accessing high quality youth friendly health services</p>	<p>1. Review legislation and institutional structure</p> <p>2. Assess needs of young people for health services</p> <p>3. Create awareness on youth health issues among key stakeholders</p> <p>4. Provide support in developing policies and laws on Youth-friendly Health Services</p> <p>5. Encourage youth participation</p>	<p>Parliament, relevant ministries</p> <p>Civil society +youth</p>
<p>3. Make the services and commodities affordable and available for youth: use various financing modalities to meet needs of all youth without exceptions</p>	<p>1. Advocate for better funding and allocation of national budgets for Youth-friendly Health Services ;</p> <p>2. Ensure that Youth-friendly Health Services are included in national health insurance schemes, especially for most-at-risk young people;</p> <p>3. Support resource mobilization for Youth-friendly Health Services including participation in Global Fund round 11</p> <p>4. Utilize capacity of private sector as a provider of youth friendly health services</p> <p>5. Establish social marketing program for youth focused on condoms</p> <p>6. Include contraceptives and condoms in national health programs budget</p>	<p>Health insurance fund, local authorities, civil society, Relevant Ministries</p>
<p>4. Increase technical capacity of health professionals working with youth,</p>	<p>1. include training of health providers on Youth-friendly Health Services in national health and youth programs;</p> <p>2. support relevant institutions at</p>	<p>Relevant ministries, academia, NGOs, professional associations</p>

	<p>different levels (national, regional, district) to provide continuous education on youth health and risky behaviors</p> <p>3. Create multi-professional teams to provide services for youth and establish referral system;</p>	
<p>5. Strengthen evidence base on youth health and services to be used for advocacy, programming and decision making.</p>	<p>1. Collect and analyse specific data and information regarding key youth populations at-risk to enable effective and advocacy and programming</p> <p>2. Advocate for disaggregation of data by <i>all</i> age groups and sex</p> <p>3. Review existing data and exam the gaps</p> <p>4. work with international, regional and national partners to agree on a set of standardized indicators on youth health services</p> <p>5. Monitoring and documentation of good practices</p>	<p>relevant ministries , Academia, civil society, local government, local authorities</p>
<p>6. Recognise, acknowledge and accept Young people at-risk (young PLHIV, IDUs, MSM, LGBTQ, Roma, sex workers, prisoners, migrants, refugees, IDPs, victims of human trafficking and others) as equal members of society.</p>	<p>1. Introduce and scale up programs on raising awareness about needs of most at risk populations;</p> <p>2. Promotion of rights and services for the target groups and create enabling environment;</p> <p>3. Review and revise legislation to eliminate barriers to access to services for most at risk populations;</p>	<p>Relevant ministries, Parliament , civil society, local government, local authorities</p>
<p>7. Develop programs for youth key populations and ensure sensitisation, training and technical support for service providers working with these key populations</p>	<p>1. Provide specific services for these groups as part of the Youth-friendly Health Services</p> <p>2. Incorporate information and skills building in serving most-at-risk young people into training curricula for health professionals working at Youth-friendly Health Services ;</p> <p>3. Establish youth-friendly substance abuse (alcohol,</p>	<p>Civil society, relevant ministries, academia, local authorities, private sector</p>

	tobacco, drugs, etc) prevention programmes and affordable treatment and rehabilitation programs for youth;	
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Theme III: Ignorance - Out, Sexual Health Education - In!

Research has underscored that youth in EECA lack basic knowledge about SRH. This ignorance compounds a range of vulnerabilities and contributes to high teenage pregnancy (and subsequent abortion rates), high HIV and other STI prevalence among youth, school dropout, unemployment and poverty.

Noteworthy and positive steps have been taken in a number of countries to approve curricula framework, develop teaching materials and undertake teacher training to offer life skills and family life education in schools. The focus of materials has generally been on STI and HIV prevention and on contraception. Yet, EECA has been generally slow to adopt sexual health policies and offer comprehensive programs in schools. Lacking vision and support for a holistic approach, curricula are often narrowly conceived, directive in approach, and not infrequently perpetuate cultural biases and stereotypes.

Peer education initiatives have been widely applied throughout the region. Yet concerns have been expressed about programme coverage among rural youth and among youth marginalized by poverty, ethnicity, disabilities and/or sexual orientation and preference and other vulnerable groups. In addition, non-formal education initiatives are heavily dependent on outside funding and are often delivered on a pilot basis with limited geographic scope. Interactive media, internet based education, social networks and on-line media and exchange are becoming important vehicles for youth SRH education and counseling and merit further utilization.

In light of this, **the Conference notes** that comprehensive sexual and reproductive health education should be defined in the broadest sense, including:

- Building knowledge on all aspects of SRH; sexuality; respectful, loving relationships; and the rights of all individuals to make life choices freely; and
- Building skills to enable all young people to avoid unintended pregnancies; HIV and other STIs; and sexual exploitation; and to their lives free from stigma, discrimination, abuse and violence, irrespective of their reproductive choices, sexual identity/orientation, HIV status, gender or ethnicity.

The **Conference also notes** the Almaty Resolution on Preventive Education, prepared in April 2011, which identifies and defines comprehensive aspects of education for young people on reproduction and prevention of HIV/STIs. This includes acknowledgement of the fact that there is sufficient evidence that comprehensive SRH education is essential for the health of young people and does not lead to negative impacts such as earlier sexual debut or increased sexual activity in young people. This Conference Action Framework builds and extends upon this Almaty Resolution.²

In light of the above, the **Conference calls upon policy makers to undertake the following:**

² Conference Resolution – Raising Effectiveness of prevention education for adolescents and young people in Eastern Europe and Central Asia: Regional Conference on HIV prevention, healthy lifestyle promotion in education. Almaty, Kazakhstan 19-21 April 2011.

SRH Education for All – Recommendations and associated actions

Recommendation	Actions	Who should lead	Timeframe
1. Ensure comprehensive Sexual and Reproductive Health Education is mandatory in all schools, delivered at all age sequenced levels, and is in line with characteristics identified in the Almaty Resolution on Preventive Education.	<ol style="list-style-type: none"> 1. Develop a national strategy for human rights based and gender sensitive SRH Education for all 2. Pass legislation to enact mandatory comprehensive SRH Education. 3. Develop quality national programmes based on international standards to incorporate SRH education within school curricula. 4. Commit national financial resources to ensure provision of adequate materials, training of teaching staff and monitoring and evaluation of SRH education in a sustained manner 	Parliamentarians Relevant Ministers eg Education, Finance, Health	Implemented by 2014 (pre MDG target date) Track progress bi-annually

<p>2. Ensure support and resource allocation for both government and non-government programs, working with out-of-school and vulnerable young people</p>	<ol style="list-style-type: none"> 1. Conduct a needs assessment and costing exercise to identify required resources 2. Establish a mechanism for financing non-government organizations in a sustainable manner including for networks of young people and other at-risk/vulnerable groups 3. Identify complementary and synergistic government and non-government roles in community based SRH education programmes 4. Ensure factual resources to train parents and SRH education teachers in multiple sectors and settings (eg FBOs, worksites, sports, social/health services) 5. Support and strengthen civil society/ non-government organizations to provide SRH education to key and vulnerable populations 6. Utilize existing social networks to inform young people in SRH and create special online programs for youth 7. Monitor, evaluate and refine SRH education programmes to ensure quality, cost effectiveness and sustained impact 	<p>Parliamentarians Local Government Non- Government Organizations Young people Ministry of Finance</p>	<p>2014</p>
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<p>3. Adopt a multi-sectoral approach and partnerships to develop and implement the above policy, legislative framework and resource allocation for comprehensive SRH education both within schools and community.</p>	<ol style="list-style-type: none"> 1. Identify multi-sectoral approaches and partnerships within National Strategies on SRH Education 2. Engage all relevant stakeholders including within government, ministries, NGOs, youth, FBOs and civil society 3. Create an enabling environment for ensuring civil society, youth and parental support and involvement 	<p>Relevant Ministries Local Government NGOs inc. Parental Associations; FBOs</p>	<p>2014</p>
<p>4. Relevant UN agencies should take a lead role in raising these issues at a country level and support relevant ministries and civil society groups in implementing comprehensive SRH education for all</p>	<ol style="list-style-type: none"> 1. Provide international guidelines on SRH education 2. Liaise with relevant national stakeholders to assist implementation of the above recommendations 	<p>UNFPA, UNESCO, UNAIDS, UNICEF, WHO, ILO</p>	

The conference delegates suggested to consider UN General Assembly debate on youth issues with the view to reinforce governments commitments and unite assistance for youth development.

They also made overarching recommendations:

- Create mechanism for reporting on youth issues and implementation of the recommendations
- To report on progress on youth action framework by 2015 as part of the MDG reporting process
- Encourage each country to take in to account specificity of age groups while developing youth programs and implementing the recommendations

Conference participants agreed on the above recommendations and associated actions. Furthermore, country delegations agree to advocate for early implementation of these recommendations within their respective countries.

