

National Youth Recommendations for ICPD+30







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Blind Youth Association Nepal (BYAN) is a partner organization of "Right Here, Right Now-2". BYAN was established with the vision that "Persons with disabilities, (including visually impaired) can enjoy an independent and dignified life in an inclusive society". The organization is actively involved in advocacy, education, employment, disaster risk reduction, political participation and the promotion of sexual and reproductive health and rights of persons with disabilities.

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1. Background

Youths play an important role in the political, economic, and social changes of a nation. Their energy, creativity, and ability to bring positive changes are essential for a country's progress. Consequently, they are often referred as the invaluable asset and the backbone for building a nation. In Nepal, people of the age group of 16 to 40 years are considered youths ¹. They constitute about 42.55% of the total population ². For the first time in the history of Nepal, youths have occupied one of the largest segments of the country's demography resulting in a major advantage. If educated, skilled, and empowered properly, these youths can become a demographic dividend and contribute to the economic growth and development of the country ³.

In both developed and developing nations, fostering the qualitative and quantitative development of young individuals is of paramount importance for the overarching progress of the society. However, young people are facing various challenges such as unequal access to relevant education and employment opportunities, limited access to vocational skills and technology, high unemployment rate, youth migration, political instability, inadequate health and mental health services, caste, gender, and regional discrimination ⁴.

Access to health and education is imperative for the holistic development of young people. Moreover, the significance of sexual and reproductive health and rights cannot be overstated in this context. According to the World Health Organization, sexual and reproductive health is defined 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 sexual and reproductive system and its functions and processes" ^{5,6}. This includes a range of services such as maternal and newborn health services, family planning, prevention and treatment of HIV/AIDS as well as other sexually transmitted infections, comprehensive sexuality education, safe abortion, prevention of gender-based violence, detection and treatment of infertility and cervical cancer. Moreover, sexual, and reproductive rights encompass the right to choose to marry or not to marry, to decide whether to have children, when to have children, how many to have, the right to use services in a respectful manner, and the right to be free from abuse ⁷.

Educating people through comprehensive sexuality education is an important part of sexual and reproductive health and rights (SRHR). This education equips young people with knowledge about

human development, anatomy, affection, love and relationships, sexuality, violence, sexual behavior and sexual orientation, reproductive health, contraception, HIV, and other sexually transmitted infections. Moreover, comprehensive sexuality education develops young people's information and communication skills, analytical thinking, and conversational skills. This ultimately helps youths in their overall educational progress and empowers them to advocate for their rights ⁸.

In Nepal, young people face many challenges in the domain of sexual and reproductive health. The proportion of married women who are unable to use family planning devices despite not wanting to give birth or wanting to give late birth is 21%. This percentage is highest in the age group of 15-19 years at 30.9% and in the age group of 20-24 this ratio is 29.1%. Research shows that only 16% of young women and 27% of men have complete knowledge about HIV prevention. In Nepal, women get married before men. The average age of first marriage is 18.3 years for women and 21 years for men ⁹. Nepal is the country with the third highest rate of child marriage in South Asia. Around 37% of Nepalese women of the age group of 20-24 get married at the age of 18, while 10% get married before 15 years ¹⁰. About 23% of women aged 15 to 49 have been victims of physical violence since the age of 15 ⁹.

According to the records of the Cyber Crime Bureau, more than three thousand cases of online abuse were registered in Nepal in the year 2021 ¹¹. Lack of menstrual health education, poor comprehensive sexuality education, and lack of proper water, sanitation, and hygiene facilities in schools, have been cited as the major reproductive health challenges among adolescent girls ¹². Although certain aspects of comprehensive sexuality education are included at the school level, teachers play a major role in its effective implementation. Different factors such as traditional way of teaching, lack of lesson plan and physical infrastructure to teach in a practical way are the major hindrances for the delivery of quality comprehensive sexuality education ¹³.

Sexual and reproductive health of young people is largely stigmatized in our societies. According to one research, even teachers and health care providers cannot talk openly about this issue¹⁴. These problems are more complicated in the vulnerable groups. Sexual and gender minority youths often face obstacles and challenges in every aspect of their lives. According to a survey conducted among the sexual and gender minorities, 60% said they had experienced at least one incident of abuse or discrimination, and more than one-third said they had experienced discrimination or abuse

in three or more public places. The same research highlighted that among the discriminations faced by them in health institutions, the discrimination done by the service provider by denying the service was the highest ¹⁵. Research has shown the youths of sexual and gender minority groups are more likely to engage in unprotected sex than other groups. As a result, the rate of sexual infections is in greater prevalence in this population ¹⁶. Access to sexual and reproductive health remains very poor among persons with disabilities due to various factors like lack of information about sexuality, inaccessible services, stigma, and negative attitudes from society and service providers ¹⁷. Moreover, the information available on sexual and reproductive health is not available in accessible formats such as braille, sign languages, large prints, simple language, and pictorial materials. Consequently, access to health education and information is also a challenge in this population ¹⁸.

2. International Conference on Population and Development (ICPD)+30

The International Conference on Population and Development (ICPD) is a significant event in the realm of global reproductive health and population issues. The conference was held in 1994 in Cairo, Egypt, and is often referred to as the Cairo Conference. It brought together around 20,000 delegates from governments and non-governmental organizations (NGOs) to discuss various issues, including maternal health, family planning, sexual health, and women's and girls' education. The key outcome of the ICPD was the adoption of the Cairo Declaration on Population and Development and the Programme of Action (PoA). The conference redefined the focus of development away from population targets and towards reproductive health and rights.

Since the adoption of the ICPD Programme of Action, United Nation's Population Fund (UNFPA) has supported five-year reviews of its implementation and the year 2024 is the 30th anniversary of the conference. At the 25th anniversary of ICPD, representatives of the world gathered in Kenya at the landmark Nairobi Summit to not only review the progress made but also put forward new commitments to help achieve the ICPD goals, in line with other United Nations commitments like the Sustainable Development Goals,

The ICPD is significant because it recognized that young people have specific reproductive health and right's needs. It called for governments to provide young people with access to comprehensive sexual and reproductive health education and services, including contraception and safe abortion. Nepal has adopted both the ICPD PoA and has presented commitments at the Nairobi summit in 2019. In the 30 years since the ICPD, significant progress has been made on youth development and reproductive health and rights. However, many challenges remain. Youth continue to face barriers to education, employment, and healthcare. Moreover, marginalisation of persons with disabilities and sexual and gender minorities persists.

The upcoming ICPD30 event will mark three decades of accomplishments since the inception of the International Conference on Population and Development (ICPD). It will also recognize the increasing recognition of the crucial role of human-centric sustainable development. This occasion will provide an opportunity to reaffirm dedication to the ICPD's objectives and prepare for the forthcoming population and development agenda beyond 2030.

Therefore, in alignment with the principle of nothing about us without us, this report has been prepared under the leadership of the "Right Here, Right Now" network to represent the voices of young people and it is their call to action for the upcoming ICPD+30. A series of provincial level discussions were held where young Nepalese presented their views, concerns, and aspirations regarding youth-related issues. Moreover, the report is prepared by reviewing relevant research articles and policy documents.

All the consultations called upon equal access to education, health services, and employment opportunities for sexual and gender minority youths and youths with disabilities. Although there are progressive policies and rules for the youths in Nepal, their weak implementation was perceived as a major challenge by the young people. Unified voices were heard on fostering effective coordination between the three tiers of governments.

The recommendations received from the consultations are divided into two sections – the general recommendations and recommendations specific to the sexual and reproductive health and rights.

3. General Recommendations

Education

- There should be provisions of compulsory quality, technical, and vocational education starting from the school level.
- Production and distribution of skilled and technical human resource should be promoted with enhancements in the current informal education, skills training, and related areas.
- In order to make teaching and learning effective from the pre-primary level, a system that adopts No tech, Low Tech, and High-tech technology and the universal design for learning should be implemented.
- School education should be linked to life skills. The capacities of teachers should be
 developed, and the academic institutions should be provided with adequate resources for
 delivering quality education.

Health

- The quality of healthcare services should be uplifted. Health service centers must be within the reach of everyone, and the overall institutional infrastructures should be accessible.
- Counseling centers should be established in educational institutions to provide mental health services.
- Awareness programs related to mental health issues should be conducted in communities.

Employment

- A comprehensive policy is essential to take youth entrepreneurship at the grassroots level.
- Emphasis should be placed on job security following engagement in skill development trainings.
- Young people with disabilities should be encouraged to start their own businesses by building supportive policies.
- The youths returning from foreign employment should be provided with financial assistance from the state based on the knowledge and skills they have acquired from abroad, and employment opportunities should be created in the country itself.
- Youth-focused investments in federal, provincial, and local budgets should be guaranteed.

• The government should offer free legal procedures and counseling services to young individuals who have experienced fraud or exploitation in the context of foreign employment.

Leadership development and empowerment

- The National Youth Council should select youths who are going to participate and represent in programs at the international level through open competitions.
- Internship arrangements should be made with federal and provincial parliaments and ministries.
- Access to science and technology is more common among the youth than any other group.
 There is a pressing need to foster their ability to utilize these tools effectively and responsibly.
- Recognizing the diversity within the youth population, opportunities for leadership and
 personal development should be made accessible to individuals from various backgrounds,
 including those with disabilities and gender and sexual minority groups.
- Creation of supportive policy environments to ensure meaningful involvement of youths in policy-making processes.
- Appropriate research initiatives focused on youth empowerment should be prioritized.
 Additionally, future plans and programs must be data-driven, with the establishment of key indicators in planned initiatives and regular measurement of progress.

Sports

- Players should be motivated by providing attractive remuneration and incentive programs.
- E-Sports should be listed and included in national-level games.
- To encourage young people with disabilities to participate in sports, a holistic policy should be adopted encompassing sports training, regular competitions, and participation in various national and international competitions.
- To provide confidence to the youths that they have a future in sports, emphasis should be placed on development of sports infrastructures, provision of sports teachers and necessary materials in schools. Moreover, it is essential to create a supportive policy environment that connects sports with business skills.

4. Recommendations for Sexual and Reproductive Health and Rights

Comprehensive sexuality education (CSE)

- It is necessary to emphasize comprehensive sexuality education for the holistic development of youth. Comprehensive sexuality education should be targeted at both inschool and out-of-school youths. The curriculum should be developed aligning with the international standards, as per UNESCO's International Technical Guidelines for Sexuality Education (ITGSE).
- Beyond ensuring access to education, there must be a focus on improving the quality of
 education, particularly in delivering comprehensive sexuality education through innovative
 and suitable technologies.
- The educational materials should be disability friendly and adequate human resources for teaching youths with disabilities should be developed.
- Policies concerning youths should encompass gender equality, disability inclusivity, and social integration, reflecting a holistic perspective.
- Capacity building initiatives should be directed towards teachers and peer educators for provision of effective CSE.
- The establishment and promotion of adolescent-friendly information centers in schools and communities should be facilitated, alongside policies to engage adolescents and young people as peer educators, ensuring access to comprehensive sexuality education, information, and services both within and outside school settings.
- Both schools and workplaces should be violence-free and gender friendly. Gender-based violence awareness programs and appropriate mechanisms should be adopted in these institutions to address the issues of violence and discrimination internally and externally.
- Effective implementation of the National Adolescent Health and Development Strategy 2075 and the sustainable development goals, 2030.
- Policies related to accessible information, communication, educational materials, development, promotion, and distribution should be formulated and implemented.

- Initiatives such as the school nurse program should be expanded, and service providers should be involved in awareness raising, behavior change, health care delivery, and community engagement.
- Emphasis should be given on the distribution of quality pads under the currently implemented free sanitary pads distribution program. Moreover, promoting environmentally friendly menstrual management practices is essential.
- Policies should be developed to facilitate the adoption of successful practices by government and non-governmental organizations.

Sexual and reproductive healthcare

- Necessary plans should be formulated to include the youth working in the formal and informal sectors in the current health insurance program. This can be achieved by raising awareness about the program's availability and its benefits.
- Stigma-free sexual and reproductive health services should be established as a right. To
 achieve this, it is essential to provide appropriate training for service providers and conduct
 community awareness programs to promote understanding and acceptance within
 communities.
- Technologies such as social networks, and toll-free numbers should be utilized and promoted to disseminate health-related information.
- Awareness should be raised about the currently available health services ultimately increasing their utilization.
- It is imperative that laws aimed at ending child marriage, forced marriage, chaupadi, and other such practices are enforced, and youth should be mobilized to actively participate in changing these harmful practices.
- Youth should be protected from sexual and other violence (online and offline) and emphasis should be placed on their overall development. For this, necessary policies and procedures should be formulated across all the three tiers of the government.

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