A Young Volunteer Can Do Anything
Strengthening youth activism on Sexual and Reproductive Health and Rights

Report of the study session held by
Youth Sexual Awareness for Europe (YSAFE), youth network of the
International Planned Parenthood Federation European Network (IPPF EN)
in co-operation with the
European Youth Centre of the Council of Europe

European Youth Centre Budapest
23-27 April 2013

This report gives an account of various aspects of the study session. It has been produced by and is the responsibility of the educational team of the study session. It does not represent the official point of view of the Council of Europe.
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Executive Summary

The UN Convention on the Rights of the Child states that children and young people have the right to enjoy the highest attainable health, access to health facilities (article 24), and access to information which will allow them to make decisions about their health (article 17), including family planning (article 24). Young people also have the right to be heard, express opinions and be involved in decision-making (article 12). They have the right to education which will help them learn, develop and reach their full potential and prepare them to be understanding and tolerant towards others (article 29). Additionally, young people have the right not to be discriminated (article 2). The fulfillment of Sexual and Reproductive Health and Rights of young people is essential because when young people have access to health and education, they become a powerful force for economic development and positive change.

However, the emotional, social and health needs of young people are not being fully met. Sexuality education is not always provided and related information is not accessible in many countries and communities. This while research shows that high quality, comprehensive and rights-based sexuality education programmes can delay initiation of sexual activity and unprotected intercourse, decrease the number of sexual partners, increase contraceptive and condom use, and therefore decrease unintended pregnancies and sexually transmitted infections among young people\(^1\).

Both the International Planned Parenthood Federation European Network (IPPF EN)\(^2\) and the Council of Europe are strong advocates for youth rights and participation, promote equality and diversity and oppose stigma and discrimination on any level (gender, age, sexual orientation, etc.). IPPF EN believes that in order for young people to reach their full potential, it is crucial for them to acquire information and form attitudes, beliefs and values about identity, relationships and intimacy. This is called Comprehensive Sexuality Education (CSE). IPPF believes that Comprehensive Sexuality Education should equip young people with knowledge, skills, attitudes and values to determine and enjoy their sexuality. Comprehensive Sexuality Education should take a positive and respectful approach to sexuality and sexual relationships, whether or not the young person is sexually active, and be part of their broader emotional and social development. It should ideally be delivered using a participatory learning approach, within an environment that encourages critical thinking, especially about gender equity and rights.

In order to strengthen youth activism and networking on Comprehensive Sexuality Education within a human rights framework at regional and national level in Europe and Central Asia, a 5-day Study Session was conducted for members from the Youth Sexual Awareness for Europe (YSAFE) network, the youth network of IPPF EN, in cooperation with the Youth Department of the Council of Europe. Participants attending the Study Session were between 16 – 25 years old (with an average age of 21.5 years), all members of the YSAFE network and active volunteers in their local organizations (Member Associations of the IPPF European Network).

Based on a preparatory survey that participants had to complete, it became clear that Comprehensive Sexuality Education is not a political priority in many countries in Europe and Central Asia. While some countries have relatively comprehensive sexuality education as part of an established educational curriculum, others struggle with basic and limited provision of any information regarding sexuality. In many countries across the region, there is a lack of laws and policies focused on Comprehensive Sexuality Education. Even when policies are adopted, there is a lack of qualified educators, no designated budgets and no consistent monitoring of quality and implementation. Sexuality is a sensitive issue to talk about and in many countries there is a negative approach to sexuality, focusing on risky behaviour. There is a lot of influence from conservative and religious groups in this, especially on the lack of acceptance of same-sex relationships and sexual minorities, the difference in attitudes towards girls and boys as well as the inclusion

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\(^1\) Click [here](#) or [here](#) for an overview of the evidence base on sexuality education.

\(^2\)IPPF European Network (IPPF EN) is one of the six regions of IPPF. IPPF EN consists of 39 Member Associations (MAs) across Europe and Central Asia and a Regional Office located in Brussels, Belgium. IPPF EN is supported and sustained by the dedication of individuals around Europe who freely volunteer their time, skills and ideas to improve the lives of women, men and and young people in their communities and beyond. For more information see [www.ippfen.org](http://www.ippfen.org).
of sexuality education as a subject in schools. Furthermore, young people are not involved in decision-making regarding Comprehensive Sexuality Education.

There is however a growing understanding among parents, teachers and especially young people on the importance of Comprehensive Sexuality Education and more openness to talk about it and get engaged. In many countries, coalitions and partnerships are being formed to work on the realization of Comprehensive Sexuality Education using existing laws and policies that are in place as well as guidelines developed at regional and international level. Moreover, a number of internationally signed treaties and conventions, especially ones relating to human rights, provide advocates with further basis to hold governments and institutions accountable.

Following those findings, the activities in the study session focused on empowering participants to build advocacy action plans on Comprehensive Sexuality Education to implement in their own local/national context. Plans are developed to raise more awareness among young people on their rights and opportunities; and among leaders and policy makers on their obligations and the importance and benefits of Comprehensive Sexuality Education. Other plans focus on the implementation of national curricula on Comprehensive Sexuality Education or improving the provision of Comprehensive Sexuality Education by NGOs. Furthermore, plans are made to increase youth advocacy and youth involvement related to Comprehensive Sexuality Education. At regional and international level, YSAFE will continue to advocate for the goals and recommendations set forth by the Bali Declaration and emphasise the importance of young people’s leadership and meaningful engagement in the successful creation, implementation, and sustainability of a post2015 agenda.

Based on the Study Session, the following recommendations were made by participants and the preparatory team for governments, IPPF EN/YSAFE, civil society organizations and young people:

- We recommend governments across Europe and Central Asia, including Member States of the Council of Europe, to provide access for all young people to non-discriminatory, non-judgmental, rights-based, age appropriate, gender-sensitive health education including youth-friendly, evidence based comprehensive sexuality education that is context specific. Furthermore, government should ensure leadership and meaningful participation of all young people through funding empowerment and capacity building of young leaders as well as create clear pathways to meaningful participation in governance at local, national, regional, international and intergovernmental levels.

- We recommend IPPF EN and YSAFE to keep up and strengthen its role as advocate for CSE at national, regional and international levels, invest in partnerships with a diverse range of actors, strengthen its regional and national youth groups and make stronger links at national level between Human Rights Education and Comprehensive Sexuality Education.

- We recommend civil society organizations to form partnerships and coalitions to advocate for the inclusion of CSE in national policies and strategies as well as for the implementation, monitoring and evaluation of CSE.

- We recommend young people in Europe and Central Asia to get involved in activities aimed at realising Sexual and Reproductive Health and Rights and CSE for young people in their communities as well as in regional and international advocacy initiatives around the new development framework after 2015 and taking forward the recommendations from the Bali declaration.
I. Introduction

The world is home to the largest generation of young people in history, with more than 1.75 billion people aged between 10 and 24 years\(^3\). This is a very diverse group of individuals whose realities, challenges and opportunities vary considerably from country to country. The UN Convention on the Rights of the Child states that children and young people have the right to enjoy the highest attainable health, access to health facilities (article 24), and access to information which will allow them to make decisions about their health (article 17), including family planning (article 24). Young people also have the right to be heard, express opinions and be involved in decision-making (article 12). They have the right to education which will help them learn, develop and reach their full potential and prepare them to be understanding and tolerant towards others (article 29). Additionally, young people have the right not to be discriminated (article 2).

However, young people’s emotional, social and health needs are not being fully met. In Europe and Central Asia, young people face some similar issues with regards to their sexual and reproductive health and rights. Sexually Transmitted Infections (STIs) are still spreading with young people being the most vulnerable group (75% of new infections with Chlamydia occur among young people)\(^4\). Seeking abortion is still highly stigmatized and access to abortion can be problematic. Data of the World Health Organization (WHO)\(^5\) show large differences within the region on the number of stated abortions. This suggests that women in need of abortion services have to travel or get unsafe health services. Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) young people are still facing legal and social problems with a number of their rights being violated. The Rainbow Europe Map\(^6\), covering the legal and policy situation with regards to six thematic categories across the region, shows that the highest ranked country in the European region scores 77% and the lowest ranked country only 7%, with a majority of the countries scoring under 50%. Of all the countries included, 10 countries have no protection on any dimension of discrimination towards LGBTI people. There is a lot of stigma and discrimination from society towards LGBTI people as well as within families from parents towards their children. Sexuality education is not always provided to young people and related information is not always accessible. Young people often have to deal with conflicting messages and norms regarding sexuality and gender roles. On the one hand sex is seen as negative and associated with guilt, fear and disease, but through the media and friends it is portrayed as positive and desirable. Many people still believe that providing young people with sexuality education will encourage them to become sexually active at an early age, increase the number of sexual partners etc. despite the growing evidence base proving the contrary.

Both the International Planned Parenthood Federation European Network (IPPF EN)\(^7\) and the Council of Europe are strong advocates for youth rights and participation, promote equality and diversity and oppose stigma and discrimination on any level (gender, age, sexual orientation etc.). IPPF EN believes that in order for young people to reach their full potential, it is crucial for them to acquire information and form attitudes, beliefs and values about identity, relationships and intimacy. This is called Comprehensive Sexuality Education (CSE). Most of IPPF EN Member Associations are involved in some form of sexuality education, information and


\(^{7}\) IPPF European Network (IPPF EN) is one of the six regions of IPPF. IPPF EN consists of 39 Member Associations (MAs) across Europe and Central Asia and a Regional Office located in Brussels, Belgium. IPPF EN is supported and sustained by the dedication of individuals around Europe who freely volunteer their time, skills and ideas to improve the lives of women, men and and young people in their communities and beyond. For more information see www.ippfen.org.
awareness raising on sexual and reproductive health inside and/or outside the school setting. Member Associations implement a range of strategies, including advocating for changes in national sexuality education curricula, training educators, and collaborating with governments, ministries, parents and local communities to advocate for and implement comprehensive sexuality education. IPPF has also been involved in the development of several national and international sexuality education guidelines, including the standards on sexuality education in Europe developed by the World Health Organisation (WHO) and the ‘Bundeszentrale für gesundheitliche Aufklärung’ (BZgA).

IPPF EN puts a strong emphasis on empowering young people to take a lead role in advocating for sexual and reproductive health and rights (SRHR) for youth. In 2005, IPPF EN established the Youth Sexual Awareness For Europe (YSAFE) youth network. YSAFE brings together young people from Member Associations in 39 countries of Europe and Central Asia. YSAFE members are sharing experiences and good practices, building and developing capacities as young advocates for Sexual and Reproductive Health and Rights and strengthening youth participation in IPPF EN at both the Member Association (MA) and Regional Office level.

**Aim and Objectives**

The similarities but also the differences in the issues that young people face in Europe and Central Asia provides an opportunity for them to learn from each other and, by communicating their experiences, to become creative in the solutions that make sense for their countries. In order to strengthen youth activism and networking on Comprehensive Sexuality Education within a human rights framework at regional and national level in Europe and Central Asia, a 5-day Study Session was conducted for YSAFE members in cooperation with the Youth Department of the Council of Europe.

The Study Session aimed to:

- Support young activists with knowledge, skills and tools to strengthen youth-led initiatives on sexual and reproductive health and rights and comprehensive sexuality education through human rights education and advocacy on national and regional level;
- Enable and empower youth activists to address comprehensive sexuality education through a human rights based approach;
- Provide a safe and open space for mapping challenges related to comprehensive sexuality education and identifying possible approaches in European and Central Asia context;
- Ensure space for networking between organizations engaged in comprehensive sexuality education for planning and implementing joint initiatives on national and regional level.

**Participants**

Participants attending the Study Session were between 16 – 25 years old (with an average age of 21.5) and all members of the YSAFE network and active volunteers in their local organizations (Member Associations of the IPPF European Network). Participants are active in the field of Sexual and Reproductive Health and Rights issues in their country, as peer educators, writers, researchers, advocates etc. All participants had the commitment and support from their IPPF EN Member Association before, during and after the Study Session.

**Programme and Methodology**

The work started before the actual Study Session as all participants worked on their country situations (laws and policies as well as implementation and content) regarding Comprehensive Sexuality Education. Throughout the week of the Study Session, using a non-formal learning approach with interactive and participatory methods, participants were guided through the what, why and how of effective advocacy for Comprehensive Sexuality Education using a Human Rights based approach. The programme of the week was divided in the following blocks:
This report builds on the information shared, discussions held and actions identified during the Study Session. It aims to provide more insight into Comprehensive Sexuality Education within a human rights framework (chapter II), the situation regarding Comprehensive Sexuality Education across Europe and Central Asia (chapter III), building the capacity of youth volunteers on advocacy for Comprehensive Sexuality Education (chapter IV), areas for action (chapter V) and conclusions and recommendations as well as main learning points for participants and the organisers of the Study Session (chapter VI). We hope the information in this report will not only be useful for the organisers and participants of this Study Session but also for the wide range of actors working on the realisation of Comprehensive Sexuality Education in Europe and Central Asia, including young people, civil society organisations, relevant institutions and governments.
II. Comprehensive Sexuality Education

Comprehensive sexuality education is defined as "a lifelong process of acquiring information and forming attitudes, beliefs and values about identity, relationships and intimacy." (SIECUS 2004)

It recognizes that information on sexuality alone is not enough, and therefore seeks to equip young people with the knowledge, skills and attitudes they need to make informed choices now and in the future; to enhance their independence and self-esteem; and to help them to experience their sexuality and relationships in a positive and pleasurable way. Comprehensive sexuality education offers the full range of possibilities for young people to practice safer sex and does not just promote messages about abstinence. Comprehensive sexuality education does not attempt to replace traditional family values; its role is to help young people to identify their own values, and to increase their awareness of all the available choices that are appropriate to their needs.

A growing body of research provides evidence that high quality, comprehensive and rights-based sexuality education programmes can delay initiation of sexual activity and unprotected intercourse, decrease the number of sexual partners, increase contraceptive and condom use, and therefore decrease unintended pregnancies and sexually transmitted infections among young people.

Components of Comprehensive Sexuality Education

Comprehensive Sexuality Education must be comprehensive, rights-based (founded on core values and human rights principles and laws that guarantee human dignity, equal treatment and opportunities for participation), gender-sensitive (integrating and understanding of the importance of gender equality), citizenship-oriented (emphasizing the critical thinking skills that foster responsible behaviour) and sex-positive (demonstrating a positive approach towards sexuality).

Comprehensive Sexuality Education must address the following seven essential components/elements:

1. Gender
2. Sexual and reproductive health and rights and HIV/AIDS (including information about services and clinics),
3. Sexual rights and citizenship
4. Pleasure
5. Violence
6. Diversity
7. Relationships

International guidelines

As there is no unified approach to define content and delivery of sexuality education, a number of international, regional and national standards and guidelines have been developed. There are many countries which have independently developed programmes and implement these. Without standards some young people may receive very little or no sexuality education and consequently suffer from sexual ill-health or their sexual rights are not met. Below are some of the main documents developed:

- The United Nations Educational, Scientific and Cultural Organisation (UNESCO) developed the International technical guidance on sexuality education, consisting of the rationale for sexuality education (volume 1) and topics and learning objectives (volume 2). The guidance includes a comprehensive review of studies on the impact of sexuality education in terms of sexual and preventive behavior as well as learning needs of successive age groups, starting at the age of 5.

- WHO and the German ‘Bundeszentrale für gesundheitliche Aufklärung’ (BZgA) developed the Standards for sexuality education in Europe as well as guidance for its implementation, which have been prepared as a consensus document of a European expert group on sexuality education. The standards provide an essential framework for sexuality education for European countries. The

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9 Click here or here for an overview of the evidence base on sexuality education.
10 Click here for more detailed information regarding the seven components of Comprehensive Sexuality Education.
11 Available here.
standards address the need for sexuality education for the entire age range, from birth to age 18 and over. They also differentiate the learning needs of successive age groups. The guidance for implementation provides step-by-step guidance on how to introduce new or improve existing sexuality education programmes\textsuperscript{12}.

- The ‘It’s All One Curriculum’ developed under the leadership of the Population Council, attempts to integrate sexuality, gender, HIV/AIDS and Human Rights issues into once curriculum, addressing the learning needs of adolescents. It includes sexuality lessons which can be adapted to local conditions\textsuperscript{13}.

**Comprehensive sexuality education and formal and non-formal learning**

As learning regarding comprehensive Sexuality Education is a lifelong process, learning ideally does not only take place within the formal school education, but is complemented by non-formal learning via a variety of sources (peers, media, NGOs, youth work etc.). As was shared during the Study Session:

“Non-formal education takes place in a variety of settings and contributes to the self-development of young people and their social, cultural and professional integration.”

Council of the European Union - 2006

“Non-formal education has an important role to play in reducing social inequality and exclusion and in promoting active participation in democratic life…”

Committee of Ministers of the Council of Europe (2003)

Comprehensive Sexuality Education in the formal, school setting ensures a systematic approach, based on a curriculum and including monitoring and evaluation. As young people spend a lot of time at school, school is an important source of information for young people. With Comprehensive Sexuality Education outside of the school setting, it is easier to reach the more vulnerable young people, provide more contextualized sessions, push the boundaries a bit more and ensure a strong link with youth-friendly health services.

Within learning on Comprehensive Sexuality Education, both in formal as well as non-formal settings, it is crucial to use interactive and experiential learning methods. This to make sure that it suits the realities of young people and empowers them to think critically about their own values and attitudes. Experiential learning uses exercises that facilitate new experiences (by use of observation), help children and young people understand these new experiences (by use of reflection), let them make patterns and links to the real life (by generalizing) and help them to plan how to apply these learnings in their own life. Learning in this way makes it accessible for all young people, regardless of their background or abilities. It also encourages young people to learn from each other and to respect each other's differences. The role of the experiential educator is to encourage experience to happen and to provide tools and space for processing and transforming the experience into learning. In order to be able to take up this role, sufficient training and support for educators is crucial.

**Comprehensive Sexuality Education and the international human rights framework**

Comprehensive Sexuality Education falls under the umbrella of Sexual and Reproductive Health and Rights. People often lump Sexual and Reproductive Rights together, but they are not exactly the same thing. Sexual rights deal with sexuality separately from reproduction. For example, health services might be in place to deliver children and help ensure reproductive health, but without services and access to STI testing and treatment people’s sexual health may be compromised. Of course sexual health and reproductive health are closely linked and impact on each other. For example if a person is prevented from keeping themselves sexually healthy then this is very likely to impact on their reproductive health.

Looking at Comprehensive Sexuality Education, we can extract the following relevant human rights agreements and documents that Comprehensive Sexuality Education is based on.

\textsuperscript{12} Available \url{here}.

\textsuperscript{13} Available \url{here}.
Comprehensive Sexuality Education is based on the Right to Education and can be linked to Human Rights Education which is defined as: A process whereby people learn about their rights and the rights of others, within a framework of participatory and interactive learning. The right to Human Rights Education is embedded in the Convention on the Rights of the Child (article 29), the Universal Declaration on Human Rights (article 26.2) which states that: “Education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms” and the Council of Europe Charter for Education for Democratic Citizenship and Human Rights Education (2010), which states that: “Member states should include human rights education in the curricula for formal education (…)” and “Member states should foster the role of non-governmental organisations and youth organisations in education for democratic citizenship and human rights education, especially in non-formal education”.

Comprehensive Sexuality Education is based on the Right to Health. The UN Convention on the Rights of the Child (1989) states that children and young people have the right to enjoy the highest attainable health, access to health facilities (Article 24), and access to information which will allow them to make decisions about their health (Article 17), including family planning (Article 24).

Comprehensive Sexuality Education is based on the Right to access information. In light of the Convention on the Rights of the Child, the United Nations Committee on the Rights of the Child (2003) emphasizes that states should provide adolescents with access to accurate sexual and reproductive health information, “including on family planning and contraceptives, the dangers of early pregnancy, the prevention of HIV/AIDS and the prevention and treatment of sexually transmitted diseases (STDs),” regardless of marital status and parental consent. The Committee further notes that state parties have an obligation to equip each child or adolescent “to face the challenges that he or she can expect to be confronted with in life” and that they shall promote the health and development of adolescents, supporting relationships of trust in which sexuality and sexual behaviour and risky lifestyles can be openly discussed and acceptable solutions found that respect the adolescent’s rights.”

Comprehensive Sexuality Education is based on the Right to protection against discrimination and marginalization. The United Nations Committee on the Rights of the Child (2003) emphasizes the right of adolescents “both in and out of school” to be provided with “accurate and appropriate information on how to protect their health and development and practice healthy behaviours.” The Council of Europe has a Convention on the protection of Children against Sexual Exploitation and Sexual Abuse (2010) and a Convention on the prevention and combating of violence against women and domestic violence (2011). Furthermore, the Committee of ministers made a recommendation (2010) to member states on measures to combat discrimination on grounds of sexual orientation or gender identity.

Given that the principle of nondiscrimination is central to human rights, one important way of combating stigma and discrimination in relation to young people’s Sexual and Reproductive Health and Rights is within a human rights framework. Promoting rights-based perspectives in relation to HIV/AIDS, sexual diversity, and access to information and services is a powerful strategy to emphasize the validity of young people’s claims to the knowledge and resources they need.14

Direct reference to sexuality education can be found in the Programme of Action of the International Conference on Population and Development (ICPD) from 1994. It identifies sexuality education as a human right, essential to development and human well-being. The 2012 resolution from the Commission on Population and Development highlights the importance of ‘comprehensive education about human sexuality’.

Furthermore, the ICPD Programme of Action states that: *Governments, in collaboration with non-governmental organizations, are urged to meet the special needs of adolescents and to establish appropriate programmes to respond to those needs. Such programmes should include support mechanisms for the education and counseling of adolescents in the areas of gender relations and equality, violence against adolescents, responsible sexual behavior, responsible family-planning practice, family life, reproductive health, sexually transmitted diseases, HIV infection and AIDS prevention* (ICPD PoA, para. 7.47).

**Autonomy vs protection**

Children and adolescents enjoy the same human rights as adults. However young people of 18 years and under are covered by an additional human rights convention that adults are not, this is the Convention on the Rights of the Child (CRC). Children and young people require special protection from all forms of exploitation or abuse such as: child prostitution, trafficking, sexual abuse, forced or coerced sexual activity, pornography and harmful traditional practices. This right places a responsibility on adults – including parents and health professionals – to recognize and respond to suspected abuse as well as create environments, including clinics, which are safe for young people. A particularly important concept in the CRC is the concept of evolving capacity. Children and young people of different ages have the same rights; however it is clearly the case that they have very different needs and capacities. For example a 17 year old has very different capabilities compared to a 2 year old. There are several articles within the CRC that further explain evolving capacities:

*Article 5: young people’s evolving capacity to exercise their own rights must be taken into consideration by those who provide guidance and direction to young people*

*Article 12: young people must be able to freely express their views, which should be given weight in accordance with their evolving capacity*

*Article 14: young people must be afforded freedom of thought, conscience and religion*

Quite often the ‘best interests’ and the ‘evolving capacities’ of young people—both concepts found within the CRC—are seen as being in opposition. However, the two are not mutually exclusive nor are they contradictory. What is in the ‘best interest’ of a young person is only apparent once the views of young people as well as the contexts of their lives are taken into account. In some instances, this may mean the young person needs to be protected or guided and, in other instances, this may mean that the young person is able to decide the best course of action for him/her. In other words, it is all about achieving a balance between protection and autonomy. Evolving capacity when applied to Sexual and Reproductive Health is about the concerns of young people in accessing Sexual and Reproductive Health services/information (confidentiality, consent, disclosure) and the rights of young people (health, information, decision-making). Comprehensive Sexuality Education is key in supporting young people’s capacity to make autonomous decisions.

**Comprehensive Sexuality Education in the new development framework after 2015**

Important international agreements for the realization of Sexual and Reproductive Health and Rights of young people are coming to an end in respectively 2014 (Programme of Action of the International Conference on Population and Development) and 2015 (Millennium Development Goals). Therefore, a new global framework for after 2015 is under discussion involving all relevant stakeholders, including youth. With 43% of the world’s population under the age of 25, it is imperative that the new global agenda on development place young peoples’ voices and needs at the centre. To ensure this, young people took the
lead in the Global Youth Forum held in Bali in December 2012. The Bali declaration, the outcome of the Forum, is a loud and strong reflection of the future that young people, United Nations Member States, the United Nations System, NGOs and other stakeholders agreed to as what they want and envision. The declaration includes recommendations under the overarching themes of staying healthy; comprehensive education; families, youth rights and wellbeing, including sexuality; transitions to decent work; and leadership & meaningful participation. The Declaration has clear crosscutting messages on the importance of comprehensive sexuality education, youth participation, access to comprehensive health services, including safe abortion, investment in young people, and prevention and elimination of all forms of violence.

The Bali declaration will be taken forward to ensure its incorporation into the post2015 agenda processes, to fulfill and implement the goals and recommendations set forth by the Bali Declaration and to emphasise the importance of young people’s leadership and meaningful engagement in the successful creation, implementation, and sustainability of a post2015 agenda.
III. The situation regarding Comprehensive Sexuality Education in Europe and Central Asia

The region of Europe and Central Asia is a very diverse region, ranging from Russia to Portugal and from Turkey to Norway. To get insight into the different country realities, participants of the Study Session worked on their country situations regarding Comprehensive Sexuality Education before coming to Budapest. Participants from EU countries could build on the information from the ‘Sexuality Education in Europe’ guide that was published in 2006 and that provides information about sexuality education in 26 European countries\(^5\). Participants could also use the 2012 ‘Compendium on young people’s SRHR policies across Europe’ which includes an overview of comprehensive sexuality education policies and practices in 18 countries across Europe\(^6\).

An overview of the preparatory work of participants on policies and practices regarding CSE in their country can be found in Appendix 5. This overview does not mean to be exhaustive and is a summary of the in-country situation seen from the perspective of participants. The results of the preparatory work exemplified the diverse picture of the region. While some countries have relatively comprehensive sexuality education as part of an established educational curriculum others struggle with basic and limited provision of any information regarding sexuality.

**Main findings: laws and policies**

From the 14 countries present at the Study Session, only six countries have laws in place that require sexuality education as part of the formal education system. In one of the six countries (Poland), the law is limiting access to Comprehensive Sexuality Education. Seven countries have a national government policy on sexuality education in place. However, only three countries have both a national government policy in place as well as a government strategy or implementation plan (Albania, Portugal, Ukraine). In none of the countries there is a separate budget for sexuality education. Budget is included in budget for education, youth, HIV or Reproductive Health or there are grants for prevention activities that schools and NGOs can apply for. This shows that even if laws and policies around sexuality education are adopted, it does not necessarily mean that implementation mechanisms are in place or that specific budgets are allocated. Responsibility for sexuality education at national level is mostly with the Ministry of Education, in cooperation with Ministries of Health, Ministries of Youth, etc. In only seven countries there is also responsibility from governments at local level, mostly for implementation of national policies and/or managing financial resources although in some countries local governments make their own decisions regarding sexuality education (Belgium, Bosnia and Herzegovina and Portugal).

**Main findings: implementation and content**

The implementation and content of sexuality education varies between countries as well as within countries and between different schools so it is difficult to get a clear picture. In seven countries that were present at the Study Session they have minimum standards set for sexuality education. Sexuality education is in all countries integrated into other subjects like Biology, Health Education, Life skills/Healthy Lifestyles Education, Citizenship and Family Life Education. Sexuality education targets young people from 3-25 although in most countries the focus is on young people between 14-18 years old. In Denmark, Belgium, Czech Republic, Portugal and Ukraine young people below the age of 10 years are targeted. Development of the curriculum for sexuality education is often done by the Ministry of Education or a working group of ministry representatives, NGOs, international organisations and young people (in Bosnia and Herzegovina). In some countries the curriculum is developed by schools and teachers themselves (Belgium, Bulgaria). Young people have input into the curriculum in only five of the 14 countries (Belgium, Bosnia and Herzegovina, Bulgaria, Denmark and Tajikistan). Responsible for the provision of sexuality education are mainly school teachers, but also mentioned are schools nurses and psychologists, youth advisory centers, centers for Public Health and NGO peer educators. Although schools teachers are the main persons responsible for the provision of sexuality education, training for teachers on sexuality education is in most countries not obliged and up to teachers themselves (except for Poland were a postgraduate diploma on Family Life Education is required). In all countries NGOs play a big role in the provision of sexuality education.

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education. They provide (peer) sexuality education sessions at schools, develop educational materials, ensure links to services, work on monitoring of sexuality education programmes and are often the main or only provider of teacher trainings on Comprehensive Sexuality Education.

Challenges and opportunities
Although Europe and Central Asia is a diverse region with realities that are country specific, some overall challenges and opportunities were identified by participants during their preparatory work, their work on their country posters and during discussions in the group:

Challenges:
- Conservative mentality and traditional assumptions. Sexuality is a sensitive issue to talk about. In many countries participants see a more negative approach to sexuality, focusing on risky behaviour. There is a lot of influence from conservative and religious groups in this, especially on the lack of acceptance of same-sex relationships and sexual minorities as well as the inclusion of sexuality education as a subject in schools. This challenge is more faced by participants from Eastern Europe and Central Asia and less by participants from West, North and Southern Europe although discrimination towards sexual minorities is also an issue in some of these countries.
- Differences in attitudes towards girls & boys. Many participants reflected that girls are facing much more restrictions than boys. Sexual relationships of boys before marriage are socially more acceptable and issues around contraception are often seen as female issues. In some countries participants feel that premarital virginity is used as an indicator of morality and a social norm, especially for girls.
- Lack of political will to work on implementation of CSE. Based on the preparatory work of participants it became clear that Comprehensive Sexuality Education is not a political priority. There is a lack of laws and policies focused on Comprehensive Sexuality Education and even when policies are adopted, there is a lack of national measures for sexuality education, there is no consistent monitoring of the implementation of sexuality education and there are no specific budgets allocated. Furthermore, there is a lack of collaboration between relevant ministries.
- Lack of qualified educators. Even though school teachers are often the people providing sexuality education, sexuality education is generally not a compulsory part of teacher training. This results in a lack of capacity among teachers and variations in the quality of sexuality education provided. Teachers often avoid talking about sexual health and sexual rights and instead focus on reproductive health only. When teachers are trained, there is a lack of focus on facilitating non-formal learning methodologies and skill building.
- Autonomy of schools resulting in lack of implementation of sexuality education. In many countries sexuality education is not compulsory for schools. Government can provide guidelines, but no control is possible. Sexuality education often has no required number of lessons and is integrated into several subjects. This means that both the quantity and quality of sexuality education has huge variations from school to school.
- Lack of involvement of the community, especially young people themselves. Participants feel there is an increased awareness and openness among young people to talk about sexuality. Talking with parents and the broader community is much more of a taboo, even more in rural areas than in urban areas. This shows the importance of empowering young people to address sensitive issues with their parents and communities.
- Lack of youth involvement in decision-making regarding Comprehensive Sexuality Education. In many countries, young people are not involved in decision-making processes around Comprehensive Sexuality Education, resulting in curricula and programmes that do not meet the
needs and realities of young people. Participants in the Study Session were facing similar challenges. Firstly, young people are commonly seen as asexual beings and talking about sexuality can be perceived as provocative, inappropriate or a taboo. In some of the countries extreme attitudes and beliefs can make it dangerous and harmful to openly talk about issues such as contraception, abortion and sexuality. Moreover, there is a widespread perception that young people are inexperienced and should not be engaged in decision making, politics and social issues. The lack of governmental and social structures to ensure that input by young people is collected and paid attention to, make it hard for youth advocates to be heard and keep their representatives and institutions accountable. There is also insufficient amount of programs and initiatives, aiming to empower young people and train them on how to advocate, approaching policy makers, create sustainable networks and projects and address sensitive issues. Unfortunately, some young volunteers were facing barriers in advocacy and communication in their own associations too. Participants agreed on the importance of a stimulating environment for young people to participate in.

**Opportunities:**

- NGOs play a big role in the advocacy, provision, teacher training, linking to services, monitoring and evaluation and public awareness raising around CSE. NGOs are often the main source of information for young people as well as the link to access youth-friendly services.
- Due to active involvement of NGOs as well as an increasing evidence base on the impact of CSE, there is growing awareness among parents, teachers and students on the importance of CSE.
- In many countries, more and more coalitions and partnerships are being formed (consisting of NGOs, a combination of government, educational institutions and NGOs etc.) to work on the realization of CSE.
- Regional/international guidelines on CSE have been developed, like the WHO/BZgA standards on sexuality education for Europe that can be a useful tool in advocacy for CSE.
- In many countries, some good laws and policies are in place that can form a basis to advocate for CSE.
- There is more openness among the younger generation to discuss CSE.
- Social media make it easier to reach out to young people, provide them with good quality information and engage them to take action on CSE.
Country in the focus: Belgium - Flanders

Throughout the week, Belgium (Flanders) was presented as a case study. Through interactive methods like talk shows from the 70’s and 90’s and live actor mapping, participants were asked to reflect on the situation regarding CSE in Flanders now and before, the steps that have been taken to overcome challenges and which actors were involved.

In Flanders in the 1970’s, the focus of sexuality education in society was on abstinence before marriage, sex education was mostly given by teachers of religion or non-confessional ethics. There was a lack of recognition of young people’s sexuality, it was no priority of the government and there was hardly any data available on Sexually Transmitted Infections (STIs), teenage pregnancies etc.. Abortion was illegal and there was a lack of acceptance of LGBTI people. Young people’s Sexual and Reproductive Health and Rights were mainly advocated for by the federation of family planning centers (CGSO Trefpunt) but its power was limited.

The situation however started changing when doctors started advocating for legal abortion, the pill became widely accessible and the feminist and HIV and gay movement became more strong and visible. A milestone was reached when abortion was legalized (1990). Organisations providing sexuality education in schools (CGSO) then started to receive funding from the Government of Welfare and the biggest networks of schools dedicated a handbook to education on abortion. CGSO Trefpunt, as the center of expertise in Flanders, brought together many local NGOs (family planning, HIV, youth work organizations etc.) into one Forum. Based on research, roundtable sessions were organized to feed into a position paper in which the views of the Forum on sexuality education were stated (end of the 90s). The position paper on sexuality education in Flanders (Good Lovers), looks at sexuality education from a holistic, comprehensive perspective, which means it should take into account young people’s realities, take a positive view on sexuality, address communication and development and should start from an early age (“It's a process, like learning how to swim”). The position paper was a good tool and starting point for joint advocacy as it represented the views of many organizations together. The Forum enlarged its membership, implemented the position paper on sexuality education and Sensoa conducted advocacy activities on the importance of sexuality education. In 2000, the HIV organisations merged into Sensoa and in 2003, CGSO Trefpunt joined. This turned Sensoa into a strong and visible organisation with authority in Flanders.

Currently, sexuality education is included in the cross curricular subjects in schools in Flanders. However, challenges regarding implementation remain. Schools in Flanders are autonomous so a lot depends on how much attention schools want to give to sexuality education. There is a lack of monitoring of results as well as training for teachers. The Forum continues to meet and work together to ensure sharing of experiences and learnings, the development of campaigns and joint projects. For more information, www.sensoa.be.
IV. Building the capacity of young volunteers to advocate for Comprehensive Sexuality Education

As stated in the UN Convention on the Rights of the Child, young people have the right to be heard, express opinions and be involved in decision-making (article 12). Meaningful youth participation means involving youth in all levels and processes, including its development, implementation, monitoring and evaluation. Meaningful youth participation in Comprehensive Sexuality Education ensures that educational programmes address the issues and challenges that young people face and present the information in an understandable and engaging way. Meaningful youth involvement in advocacy on Comprehensive Sexuality Education raises awareness on the reality of the struggles and needs of young people and helps overcome stereotypes; prejudices and stigma young people are often subjected to. Furthermore, involving young people in decision making processes empowers them to advocate for their human rights, develop vital life and professional skills and become active and responsible members of society. The fulfillment of Sexual and Reproductive Health and Rights of young people is essential because when young people have access to health and education, they become a powerful force for economic development and positive change.

Meaningful youth involvement in realizing Comprehensive Sexuality Education can happen in various ways. NGOs often have a long established practice of peer education, which creates a safe and interactive environment for young people to learn from each other, discuss important issues and exchange views, information and experiences. Young people can further reach out to the public and become activists for Sexual and Reproductive Health and Rights and get involved in public campaigns for raising awareness and providing services. Young people can be engaged in training, running local and national youth networks and engaging more young people in human rights and activism. Youth-led initiatives and organizations often come up with original ideas and strategies using modern and unconventional methods. Many of the young volunteers are also social media “natives” and can create and implement different interactive, engaging and innovative campaigns and easily and comprehensively convey information and reach their peers. Last but not least, young people can become advocates for their rights on a national and international level, making sure sexuality education is comprehensive, evidence-based, age-appropriate and an integral part of the national curriculum. In many of the societies which view young people as “a-sexual” beings, youth advocates can become an example and a voice for the needs and capabilities of youth.

Advocacy is the act or process of supporting a cause or issue. An advocacy campaign is a set of targeted actions in support of a cause or issue. We advocate for a cause or issue because we want to build support for that cause or issue, influence others to support it; or try to influence or change legislation which affects it (IPPF Advocacy Guide, 1995).

Six steps to effective advocacy:
In order for young volunteers to become strong advocates on Comprehensive Sexuality Education, a step by step method to strategically plan your advocacy was presented. With interactive methods, participants were guided through some of the steps:

- Problem Tree: The preparatory team used the methodology of the ‘Problem Tree’ to help participants identify the main problem in their countries and break down the causes and effects of this problem. This session helped participants understand what the root causes of the problem are and what they as youth advocates can work on.
- Stakeholder mapping: Participants visualized the environment in their county by mapping the most important stakeholders related to Comprehensive Sexuality Education and the power relations between them. This will help them to better target their actions and build fruitful partnerships.
- Messaging carrousel: As having an effective advocacy message ready is crucial for the success of your advocacy efforts, the preparatory team encouraged participants to practice their messaging skills in an exercise where they had to convince different targets (a parent, a teacher, a Member of Parliament, a donor and a religious leader) of the importance of Comprehensive Sexuality Education. The participants were also encouraged to practice both sides of the dialogue in order to better understand the interests and motivations of different targets and the importance of strategic communication whereby you inform, motivate and persuade someone to take action.

Action Planning: Building on the problem tree and stakeholder mapping, the participants had to create a ‘ladder’ which illustrated a possible chain of actions and activities in order to address a very specific problem they want to tackle. The ladder formed the basis for a more detailed action plan on improving Comprehensive Sexuality Education in their communities, including a timeline and responsibilities. The template for the action plan can be found in appendix 6. The action plan will support participants in planning their actions strategically and enables them to present, discuss and further develop their plan with their Member Association and peer groups.
V. Areas for action - follow-up activities

Throughout the Study Session, participants were guided through a step by step approach including issue identification, stakeholder mapping and message development in order for them to develop their own advocacy action plan targeted towards policy change in their local/national context. Participants were encouraged to focus on realistic and feasible steps. A total of 14 action plans were developed, one for each country that was represented. Participants received all the resources and tools used throughout the Study Session to use in their in-country work.

To create a team of youth advocates to further work on the action plan, many participants planned to engage and train youth volunteers in their Member Associations on Comprehensive Sexuality Education and advocacy using the knowledge and skills gained during the Study Session. Another common point in all action plans is the active use of social media as a tool for raising awareness, increasing visibility and gaining support.

In countries where there is no existing national curriculum the focus of the action plans is mostly on raising awareness on the importance of Comprehensive Sexuality Education. In Czech Republic, participants will work via the media to promote Comprehensive Sexuality Education. They will publish an article in the university newspaper, develop a short movie on Comprehensive Sexuality Education to share on Facebook and Youtube, open a Facebook page on Human Rights in Czech Republic and work with their Member Association on a rights-based Comprehensive Sexuality Education curriculum to present to the Ministry of Education. In Romania, participants want to collect information on the needs of young people regarding Comprehensive Sexuality Education, develop a manifesto for and by young people and disseminate the manifeste via schools. In Bulgaria they also want to collect more qualitative data via a questionnaire for parents, teachers and young people to understand and evaluate the situation in their community regarding Comprehensive Sexuality Education. This combined with face-to-face meetings with school principles, parents and teachers. Furthermore, they want to raise more funding and resources to organize awareness raising events on Comprehensive Sexuality Education (like concerts and social gatherings). In Macedonia, participants want to work towards more youth involvement in advocacy for Comprehensive Sexuality Education in the school curriculum. This amongst others by organising workshops on Comprehensive Sexuality Education for young people to encourage them to get involved and sign a petition, by organising meetings with parental committees to inform parents about the importance of Comprehensive Sexuality Education and to sign a petition, by developing an internet game on Comprehensive Sexuality Education and presenting the game in primary schools in order to increase the interest among younger people and by disseminating brochures via schools and social media. In Portugal, participants would like to increase access to Comprehensive Sexuality Education for young people and involve their families and communities. This by working towards a Comprehensive Sexuality Education manual to present to relevant ministries for approval and train teachers, health professionals as well a parents on the manual. Furthermore, participants would like to talk with schools to organise free debates on Comprehensive Sexuality Education for young people and involve the media in raising awareness on the importance of Comprehensive Sexuality Education.

In other countries with no existing national curriculum on Comprehensive Sexuality Education, participants want to focus more on the provision of Comprehensive Sexuality Education by the Member Association Itself. In Armenia, participants want to first identify training needs of young people in order to develop an online course on Comprehensive Sexuality Education for young people and disseminate this course via the website of the Member Association. In Ukraine, they want to develop guidelines for peer educators providing Comprehensive Sexuality Education, test the guidelines to get feedback from young people and teachers and train peer educators on how to integrate the guidelines in their work. In Tajikistan, they want to increase awareness among young people on the availability of Comprehensive Sexuality Education within the youth-friendly centers of the Member Association and at the same time advocate for increased capacity of these youth-friendly centers to provide Comprehensive Sexuality Education. To raise awareness among young people on Comprehensive Sexuality Education, the participants want to work on strong Comprehensive Sexuality Education related messages and posts to disseminate online, in cooperation with staff members of the Member Association that participated in a training on the use of new media. In Poland and Uzbekistan, participants want to develop a website providing young people with comprehensive, rights-based and
gender-sensitive information on sexuality. Participants from Uzbekistan plan to turn the site into a regional website for the region of Central Asia and Caucasus, also containing relevant information from the various countries. This site can be a basis for further (regional) initiatives on Comprehensive Sexuality Education.

In countries where there is an existing national curriculum for schools to use, the focus of the action plans is a bit different. In Bosnia they will for example focus on the implementation of the newly developed Healthy Lifestyles Curriculum by organising meetings with school principles, parents as well as teachers and students on the importance of the curriculum. This combined with raising awareness via social media and activities like street actions. In Albania, they want to collect more feedback from young people in schools on the curriculum to use towards the ministry and for improving the implementation of the curriculum. In Denmark, they want to ensure that Comprehensive Sexuality Education becomes mandatory in education for teachers. This via a social media campaign with identified partner organisations to raise awareness on the importance of the issue and to gain support via a petition. The petition as well as collected testimonies from teachers that do not feel capable of providing Comprehensive Sexuality Education will then be presented to the Ministry of Children and Education to get political support for the matter. In Belgium, they want to focus more on strengthening the role and visibility of youth volunteers and youth advocates in the Member Association by developing and implementing a youth-led project as well as increasing visibility on social media by posting more blogs and articles on the issue of Comprehensive Sexuality Education.

During the session, participants shared their action plans among each other and were encouraged to find similar ideas and patterns and think on how they can build connections in order to help one-other and share good practices. Participants and Member Associations have also been encouraged to become more actively involved in the work of the Council of Europe via national training courses on Human Rights Education, regional training courses and study sessions, the European Youth Foundation, providing input on surveys, and get engaged at national or regional level in relevant campaigns like the ‘No Hate Speech’ movement. Participants and Member Associations from Member States of the Council of Europe will be encouraged to promote the Istanbul Convention on preventing and combating violence against women and domestic violence as well as the Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse. The recommendation of the Committee of Ministers to member states on measures to combat discrimination on grounds of sexual orientation or gender identity as well as the Council of Europe social charter and charter on Education for Democratic Citizenship and Human Rights Education are useful advocacy tools for Member Associations to use in their national advocacy work.

Follow-up activities of the Study Session at national level will be monitored and supported by the YSAFE Steering Committee, the YSAFE coordinator and relevant IPPF EN Regional Office staff. Where possible, links will be made with work at regional and international level on Comprehensive Sexuality Education, for example the work on the implementation of the WHO/BZgA standards on Sexuality Education in Europe and the roll-out of the newly developed Comprehensive Sexuality Education assessment tool by IPPF and UNESCO as well as with European advocacy work using the Council of Europe social charter and international advocacy processes on the new development framework after 2015.
An evaluation form will be sent to all participants and Member Associations six months after the Study Session to monitor the progress of the action plans and how the lessons learned from the Study Session are used. Participants are encouraged to keep up regular communication with the other participants of the Study Session and the wider YSAFE network. This to strengthen the linking and learning within the network. This will be facilitated by the YSAFE coordinator.
VI. Conclusions and recommendations

Overall conclusions regarding Comprehensive Sexuality Education in Europe and Central Asia

The study session was a rich learning experience for both the preparatory team and the participants and helped draw valuable conclusions on Comprehensive Sexuality Education, youth rights and involvement. While the preparatory survey and the ongoing discussions during the study session proved that the region of Europe and Central Asia is extremely diverse, they also highlighted a number of ongoing common trends and challenges regarding Comprehensive Sexuality Education and Sexual and Reproductive Health and Rights, especially for young people.

As exemplified in the report and in a number of the mentioned regional and international documents, Comprehensive Sexuality Education is one of the main pillars in fulfilling young people’s sexual and reproductive health and rights and is essential in fighting stigma, discrimination and gender-based violence. In order to be considered comprehensive, a sexuality education system should be human rights and evidence based, age-appropriate and continuous throughout the life of children and young people (preferable starting as early as possible). Moreover, it should cover a broad spectrum of topics, take a positive approach towards sexuality, engage young people and create a safe and open space for them. In order to reach its full potential, Comprehensive Sexuality Education should be introduced through both formal and non-formal learning and be complimented by a network of accessible and youth friendly services. Such an environment equips young people with valuable life skills that allow them to make informed and independent decisions, develop their own personal views and identity, protect and enjoy their human rights (including sexual rights), have equal and fulfilling relationships and develop their potential. In addition, Comprehensive Sexuality Education not only drives personal transformation, but also brings positive social and economic changes.

Despite the established importance of Comprehensive Sexuality Education, the state of sexuality education provision in the region varies significantly. While some countries have relatively Comprehensive Sexuality Education as part of an established educational curriculum others struggle with basic and limited provision of any information regarding sexuality. Common challenges regarding Comprehensive Sexuality Education are negative attitudes towards young people’s sexuality and established gender roles; lack of financial support, political will and experience by governments, institutions and educators; unclear or lacking implementation and monitoring strategies and no space for meaningful youth participation. These factors prevent young people from receiving comprehensive, exclusive and evidence-based information and at the same time isolate youth from the decision making process on educational curricula, its contents and how it should be taught. The state of sexuality education in many countries is not only insufficient but the attitudes of educators, institutions and governments also perpetuate the existing stigma and discrimination and negative attitudes towards sexuality, especially when it comes to young people, women, LGBTI people and people living with HIV/AIDS.

Despite the challenges faced, a number of opportunities and good-practices were also highlighted throughout the study session. While the realities in the different countries were quite varied, due to different cultural, historical and religious backgrounds, it was concluded that Comprehensive Sexuality Education should be regarded foremostly, as a human rights issue, but should also be viewed as socio-economic and development issue of paramount importance. It was established that there are number of standards and guidelines on Comprehensive Sexuality Education available for use by young volunteers and activists. Moreover, a number of internationally signed treaties and conventions, especially ones relating to human rights, provide advocates with further basis to keep governments and institutions accountable.

There is however a need to raise more awareness among young people on their rights and opportunities; and among leaders and policy makers on their obligations and the importance and benefits of Comprehensive Sexuality Education. There is a need for well formulated, evidence based and targeted communication and advocacy efforts, which are adapted to the national context. Moreover, in order to ensure fulfillment of youth rights and Comprehensive Sexuality Education, young people should be involved in all levels of the decision-making and implementation process. NGOs and civil society organizations have been
seen as pioneers and experts in the area and processes such as the 2012 Global Youth Forum and its outcome, the Bali Declaration, were seen as success stories and vital steps of meaningful youth participation.

Following these findings, the activities in the study session focused on empowering participants to build action and advocacy plans based on the lessons learned during the session and their own experience as young volunteers. This process on itself and the produced action plans highlighted the important role of capacity building for young volunteers in ensuring meaningful youth participation and human rights advocacy.

Recommendations

For governments, including the Member States of the Council of Europe
We encourage governments across Europe and Central Asia to reduce barriers, allocate adequate budgets and establish partnerships between relevant ministries as well as with NGOs, private sector and civil society to:

- Provide access for all young people to non-discriminatory, non-judgmental, rights-based, age appropriate, gender-sensitive health education including youth-friendly, evidence based comprehensive sexuality education that is context specific.
- Ensure formal acknowledgement of alternative modes of learning so young people have access to comprehensive sexuality education, in formal and non-formal settings.
- Develop and implement effective systems for curriculum development and periodic review including the involvement of young people in establishing monitoring and evaluation processes.
- Ensure leadership and meaningful participation of all young people through funding empowerment and capacity building of young leaders as well as create clear pathways to meaningful participation in governance at local, national, regional, international and intergovernmental levels.

For IPPF EN/YSAFE
We encourage IPPF EN, its Member Associations and YSAFE to:

- Keep up and strengthen its role as advocate for Comprehensive Sexuality Education at national, regional and international levels. As experts in Sexual and Reproductive Health and Rights, members of IPPF EN/YSAFE can support governments and educational institutions in formulating strategies and guidelines on CSE and ensuring effective implementation, monitoring and evaluation.
- Invest in partnerships with a diverse range of actors in order to strengthen support on the issue in the highly diverse region of Europe and Central Asia.
- Further invest in meaningful youth participation by strengthening regional and national youth groups, preferably by creating national youth focal points as well building the capacity of its youth volunteers in advocacy. In this line we encourage IPPF EN to further collaborate with the Council of Europe in order to provide trainings on human rights, sexual and reproductive health and rights, CSE, human rights education, non-formal learning and youth advocacy.
- Make stronger links at national level between Human Rights Education and Comprehensive Sexuality Education and advocate for the implementation of the commitments from their governments towards Human Rights Education as stated in the Council of Europe Charter for Human Rights Education and Education for Democratic Citizenship.

For other Civil Society actors in Europe and Central Asia
We encourage civil society organizations to:

- Form partnerships and coalitions (including with youth-led organizations) to actively raise awareness on the importance of CSE in their communities, and advocate for the the inclusion of CSE in national policies and strategies as well as for the implementation, monitoring and evaluation of CSE.

Recommendations are based on the recommendations from the Bali Global Youth Forum Declaration. Available [here](#).
- Make use of guidelines and standards developed at regional and international level (like the WHO/BZgA standards for sexuality education in Europe and the ‘It’s All One’ Curriculum) and adapt these to their context.
- Share lessons learned, good practices, challenges and opportunities between countries and in the region.
- Continue their advocacy to ensure that Sexual and Reproductive Health and Rights and CSE are part of the new international development framework after 2015.

For young people in Europe and Central Asia

We encourage young people in Europe and Central Asia to:
- Get involved in activities aimed at realising Sexual and Reproductive Health and Rights and CSE for young people in their communities.
- Engage in capacity building activities to increase their knowledge and skills on SRHR and advocacy and work together with other youth advocates and civil society organizations like IPPF EN/YSAFE to develop advocacy plans on realising CSE in their communities and beyond.
- Link with other youth advocates in the region and actively share their lessons learned, good practices, challenges and opportunities as well as get involved in national, regional and international advocacy initiatives around the new development framework after 2015 and taking forward the recommendations from the Bali declaration.

Main learning points

For participants
Participants gained more insight into the work of the Council of Europe and the links with the work of IPPF EN and its Member Associations. Participants got more knowledgeable on Human Rights and how to use Human Rights in their work on Sexual and Reproductive Health and Rights and CSE. Especially the autonomy versus protection debate was highlighted and the importance of addressing the evolving capacity of children and young people to make autonomous decisions. Participants gained a better understanding of the situation regarding Comprehensive Sexuality Education in their countries and across the region, the differences and similarities and the importance of linking CSE with access to youth-friendly services. Participants strengthened their skills and confidence to speak up in front of a group and present their message to different target audiences. They learned how to create a basic advocacy strategy that can be implemented by youth volunteers in their organizations, reflection on their position as youth volunteers in their Member Associations and feel more confident to take action and play a role as youth advocate on CSE. The non-formal learning approach of the Study Session and the various interactive methods and group exercises used during the session are useful for participants when they conduct sessions and trainings in their Member Associations. Furthermore, the importance of listening to the rest of the group, respecting different opinions and ensuring open and non-judgmental atmosphere was emphasized as main learning point and something that will be useful in their role as young advocates. Participants gained insight in how cultural and social background influences how people and communities approach CSE and that advocacy has to find the best way to address community attitudes and perceptions.

For the organisers of the session
The study session served as great learning experience for the preparatory team in working with the Council of Europe and strengthening non-formal learning as a training and facilitation approach. All team members brought in their own facilitation experience but all felt that a lot was learned from preparing and facilitating a 5-day session, safeguarding the learning process of participants, using various learning methods and integrating Comprehensive Sexuality Education into a more broad Human Rights Based approach. Team members will take this increased capacity with them to future activities.

The Study Session gave a boost to the YSAFE network as it build the capacity of its members, strengthened the aspect of linking and learning in the network and increased the visibility of YSAFE as network. The Study Session promoted the involvement of young people in policy and decision making in their communities, both within Member Associations as well as at regional level via the YSAFE Steering Committee that took the lead in the identification, development and implementation of the Study Session. The Session is expected to also
contribute to increased access to comprehensive sexuality education as participants will implement their planned advocacy actions at local and national level.
## VII. Appendices

1. Day by day programme
2. List of participants
3. List of resources
4. List of links where information about the study session was posted online
5. Summary of preparation questionnaire on country situations regarding Comprehensive Sexuality Education
6. Template action plan
Appendix 1: Day by day programme

**Monday 22nd of April 2013**

20:30 Welcome evening

**Tuesday, 23rd of April 2013**

09:00 Opening and Introduction to the Study Session
    Agenda, expectations, teambuilding and groundrules
11:00 Break
11:30 Getting to know more about YSAFE, IPPF EN and the Council of Europe
13:00 Lunch
14:30 Exploring terms and definitions related to Human Rights and Sexual and Reproductive Health and Rights
16:00 Break
16:30 Country in the focus: Comprehensive Sexuality Education in Belgium
    *By Lies Verhetsel – policy officer youth at Sensoa, Belgium*
17:30 Reflection groups
17:30 Dinner
   Free time

**Wednesday, 24th of April 2013**

09:00 Opening and agenda of the day
    Exploring your views and values regarding Comprehensive Sexuality Education
11:00 Break
11:30 A Human Rights Based approach to Sexual and Reproductive Health and Rights and Comprehensive Sexuality Education
13:00 Lunch break
14:30 Global developments and resources on Comprehensive Sexuality Education
    *By Doortje Braeken – senior advisor Adolescents/young people at IPPF*
16:00 Break
16:30 My realities – country situations regarding Comprehensive Sexuality Education
17:30 Reflection groups
19:00 Dinner
21:00 Bazaar night

**Thursday, 25th of April 2013**

09:00 Opening and agenda of the day
    Identifying the issue you want to work on
11:00 Break
11:30 Mapping the relevant actors around your issue
13:00 Lunch break
14:30 Using ‘the 6-steps to effective advocacy’ tool
16:00 Break
16:30 Preparing your message
17:30 Reflection groups
19:00 Dinner
   Free time

**Friday, 26th of April 2013**

09:00 Opening and agenda of the day
    Understand the possibilities of non formal education and human rights education in supporting work on Sexual and Reproductive Health and Rights
11:00 Break
11:30 Open space session
    Creating your own bulletin board of issues to be discussed in a marketplace of sessions
13:00 Lunch
   Free Afternoon in the city
20:00 Dinner out in the city

**Saturday, 27th of April 2013**

09:00 Opening and agenda of the day
   Planning your action
11:00 Break
11:30 Presenting your action plan
13:00 Lunch
14:30 Evaluation of the Study Session
16:00 Break
16:30 Closing of the Study Session
17:30 Reflection groups
19:00 Dinner
21:00 Goodbye evening
## Appendix 2: List of participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Country</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blerta Shehu</td>
<td>Albania</td>
<td>Albanian Center for Population and Development (ACPD) - <a href="http://www.acpd-al.org/">http://www.acpd-al.org/</a></td>
</tr>
<tr>
<td>Iris Mitro</td>
<td>Albania</td>
<td>ACPD</td>
</tr>
<tr>
<td>Donora Harutyunyan</td>
<td>Armenia</td>
<td>For Family and Health-Pan-Armenian association (PAFHA) - <a href="http://www.armfha.com">http://www.armfha.com</a></td>
</tr>
<tr>
<td>Niki Desmaele</td>
<td>Belgium</td>
<td>Sensoa - <a href="http://www.sensoa.be">www.sensoa.be</a></td>
</tr>
<tr>
<td>Thomas Van de Vooorde</td>
<td>Belgium</td>
<td>Sensoa</td>
</tr>
<tr>
<td>Nejra Gadzo</td>
<td>Bosnia and Herzegovina</td>
<td>Association XY - <a href="http://www.xy.com.ba">www.xy.com.ba</a></td>
</tr>
<tr>
<td>Kerim Dzevlan</td>
<td>Bosnia and Herzegovina</td>
<td>Association XY</td>
</tr>
<tr>
<td>Velimira Karabobaliye</td>
<td>Bulgaria</td>
<td>Bulgarian Family Planning Association (BFPA) - <a href="http://www.safesex.bg">www.safesex.bg</a></td>
</tr>
<tr>
<td>Nedko Geshev</td>
<td>Bulgaria</td>
<td>BFPA</td>
</tr>
<tr>
<td>Tereza Sadvkova</td>
<td>Czech Republic</td>
<td>Spolecnost pro plánování rodiny a sexuální výchovu (SPRSV) - <a href="http://www.planovanirodinz.cz">www.planovanirodinz.cz</a></td>
</tr>
<tr>
<td>Lucie Lukasova</td>
<td>Czech Republic</td>
<td>SPRSV</td>
</tr>
<tr>
<td>Cecile Morville</td>
<td>Denmark</td>
<td>Foreningen Sex &amp; Samfund - <a href="http://www.sexogsamfund.dk">http://www.sexogsamfund.dk</a></td>
</tr>
<tr>
<td>Ewa Wilczynska</td>
<td>Poland</td>
<td>Towarzystwo Rozwoju Rodziny (TRR) - <a href="http://www.trr.org.pl">http://www.trr.org.pl</a></td>
</tr>
<tr>
<td>Catarina Evaristo</td>
<td>Portugal</td>
<td>Associação Para o Planeamento da Família (APF) - <a href="http://www.apf.pt">www.apf.pt</a></td>
</tr>
<tr>
<td>Anamaria Suciu</td>
<td>Romania</td>
<td>Societatea de Educatie Contraceptiva si Sexuala (SECS) - <a href="http://www.secs.ro">http://www.secs.ro</a></td>
</tr>
<tr>
<td>Dlinoza Shukurova</td>
<td>Tajikistan</td>
<td>Tajik Family Planning Alliance (TFPA) - <a href="http://www.tfpa.tj">http://www.tfpa.tj</a></td>
</tr>
<tr>
<td>Dzhakhongir Mirzoev</td>
<td>Tajikistan</td>
<td>TFPA</td>
</tr>
<tr>
<td>Marta Trajkovska</td>
<td>&quot;The former Yugoslav Republic of Macedonia&quot;</td>
<td>Health Education and Research Association (HERA) - <a href="http://www.hera.org.mk/">http://www.hera.org.mk/</a></td>
</tr>
<tr>
<td>Maryna Honcharova</td>
<td>Ukraine</td>
<td>Women Health and Family Planning Foundation (WHFP) - <a href="http://www.womenhealth.org.ua/">http://www.womenhealth.org.ua/</a></td>
</tr>
<tr>
<td>Umid Ergashev</td>
<td>Uzbekistan</td>
<td>Uzbek Association on Reproductive Health - <a href="http://www.uarz.uz">www.uarz.uz</a></td>
</tr>
</tbody>
</table>

### Preparatory team

<table>
<thead>
<tr>
<th>Name</th>
<th>Country</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Velimir Saveski</td>
<td>The Former Yugoslav Republic of Macedonia</td>
<td>Youth Sexual Awareness for Europe (YSAFE) and HERA - <a href="http://www.ysafe.net">www.ysafe.net</a></td>
</tr>
<tr>
<td>Maya Koumanova</td>
<td>Bulgaria</td>
<td>YSAFE and BFPA</td>
</tr>
<tr>
<td>Daniel Kalajdjeski</td>
<td>The Former Yugoslav Republic of Macedonia</td>
<td>HERA</td>
</tr>
<tr>
<td>Karolien Dekkers</td>
<td>Belgium</td>
<td>IPPF European Network - <a href="http://www.ippfen.org">www.ippfen.org</a></td>
</tr>
</tbody>
</table>

### Educational Advisor

<table>
<thead>
<tr>
<th>Name</th>
<th>Country</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Menno Ettema</td>
<td>Hungary</td>
<td>Council of Europe Directorate of Democratic Citizenship and Participation - European Youth Centre Budapest - <a href="http://www.eycb.coe.int">www.eycb.coe.int</a></td>
</tr>
<tr>
<td>Ruth Candlish</td>
<td>Hungary</td>
<td>European Youth Centre Budapest</td>
</tr>
</tbody>
</table>

### External lecturers

<table>
<thead>
<tr>
<th>Name</th>
<th>Country</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doortje Braeken</td>
<td>United Kingdom</td>
<td>IPPF - <a href="http://www.ippf.org">www.ippf.org</a></td>
</tr>
<tr>
<td>Lies Verhetsel</td>
<td>Belgium</td>
<td>Sensoa</td>
</tr>
<tr>
<td>Chelsea Ricker</td>
<td>United Kingdom</td>
<td>IPPF</td>
</tr>
</tbody>
</table>
Appendix 3: Methodologies used to reflect on CSE from a Human Rights Based Approach

Throughout the Study Session, there was a focus on non-formal learning methodologies. This to engage and empower participants to take action on Comprehensive Sexuality Education. After many of the exercises, participants were encouraged to reflect on how they felt, what they learned, what the group dynamics were and what they thought the rationale of the exercise was. This focus on non-formal learning aimed to help participants understand the methodology and also enabled them to replicate the methodologies during sessions and trainings in their Member Associations. The following methodologies were used to let participants reflect on Human Rights, Comprehensive Sexuality Education as well as their own views and values regarding Comprehensive Sexuality Education.

Fishbowl discussion
Participants first reflected on their personal experiences with Comprehensive Sexuality Education and discussed in pairs when was the first time someone said something positive to them about sexuality. They then reflected on their views and values on issues related to Comprehensive Sexuality Education. Participants were asked to select 4 statements out of the following list:

1. Should sexuality education prevent young people from starting early?
2. Parents should always be involved in sexuality education
3. Is school the best place to give sexuality education to young people?
4. Young people have to be warned about the dangers around sex
5. Young people below the age of 14 are not able to make their own decisions regarding their sexuality
6. Boys should be encouraged to play with dolls
7. Should boys and girls receive sexuality education separately?
8. Sexuality education should explain different sexual techniques
9. If you teach about sexual diversity, you promote homosexuality
10. Should sexuality education follow the existing values of your community?
11. What’s wrong with teaching abstinence?
12. If we start from sexual pleasure, how does that change the way in which we give sexuality education?
13. In order to be a good sex educator, you need to have a good sex life.

Statements 2, 4, 7 and 11 were discussed in a Fishbowl format, which means that 3 debaters started in an inner circle and people from the audience (in the outer circle) could join the debate by tapping one of the debaters on the shoulder and taking his/her place.

Participants discussed that it is hard for children and young people to talk to their parents about sexuality. Parents are often too protective and not sufficiently educated on the issues. The importance of communication between parents and their children and creating and open and safe space to talk about it was emphasized. The question of how and when to educate parents was raised and the importance of training young people now to become informed parents in the future.

Participants felt that in class, girls and boys are often separated based on assumptions about what girls/boys want to know, instead of their needs and realities (do boys really don’t want to know anything about menstruation and what this means for women?). Shared classes will diminish taboos and discrimination and contribute to better understanding of different perspectives. Power dynamics in the classroom need to be tackled by the educator in order to create a safe space for sexuality education where privacy and confidentiality are guaranteed.

At the end of the discussion, participants tried to unpack the concept of abstinence. What is abstinence, abstinence from what exactly? Participants felt that abstinence should be included in Comprehensive Sexuality Education programmes, but not as only option and agreed on the importance of receiving information to prepare yourself before you actually become sexually active.

The discussion was very engaging and motivating and helped participants think critically about the topic and evaluate their personal views and experiences.

Human Rights survey
To understand the importance of human rights when talking about sexuality, participants received a list of rights out of which they could choose six rights they can not live without and reflect in small groups on what
impact it would have on their lives as well as their sexuality and relationships if they would lose these six rights.

**Circle of Effect,**
To understand the importance of Comprehensive Sexuality Education and the impact of a lack of Comprehensive Sexuality Education to a life of a young person, participants were divided into small groups to discuss the effects of different situations:

- If you are as a girl/boy intimidated to have sex…
- If you don't have access to sexual health information…
- If you there is no one you can go to ask about your sexual orientation...
- If you don’t feel confident to ask question to your health provider about sexual health issues...
- If you cannot tell your partner what you like/dislike in sex…..
- If you think you may be HIV positive and don't know what to do…

Participants were asked to reflect on the short term (second circle) and long term consequences (third circle) as well as the rights violated in the particular situation (fourth circle). After the exercise, participants shared that the exercise really put them in the place of the person in the middle of the circle and help them understand the difference between immediate and long term consequences. Decision-makers often focus on the long term consequences so this exercise is really useful to conduct when developing your advocacy plan and messages.

**Human Rights Education and Non-Formal Learning**
For participants to better understand formal, informal and non-formal learning, they observed a short theatre play encompassing the various ways of learning and reflected on the differences. Through a methodology called ‘the lake of frozen rights’ participants experienced a combination of non-formal learning on human rights while at the same time working on group dynamics, team building and competition. The importance of a combination of formal, informal and non-formal learning for Comprehensive Sexuality Education was discussed as well as the link between Human Rights Education and Comprehensive Sexuality Education.

**Open Space**
Through the Open Space methodology, participants were invited to address issues that still need to be addressed for them or opportunities and to use each other's expertise to create solutions. This methodology ensures that all of the issues that are most important to the participants will be raised, that all of the issues raised will be addressed by those participants most qualified and capable of getting something done on each of them, that all of the most important ideas, recommendations, discussions, and next steps will be taken into account in action planning and documented in the study session report and that participants will feel engaged and energized by the process. Participants made a bulletin board of sessions:

- How and where to involve parents?
- The situation on LGBTI in the region
- Intimate talk about sex and relationships
- What is the best way to reach a group of young people?

After creating the agenda, a marketplace started in which participants could move freely between, learning and contributing. Relevant results from the discussions are integrated into the report.
Appendix 4: List of resources

Resources from the Council of Europe:
- Website of the Youth Department where all calls for training courses will be launched: click here.
- Council of Europe general website with links to all other departments: click here.
- Link to the NO Hate Speech Campaign: click here.
- Link to Charter on EDC/HRE: click here.

Resources from IPPF:
- Exclaim – young people’s guide to sexual rights: click here.
- IPPF framework on Comprehensive Sexuality Education: click here.
- From evidence to action – advocating for comprehensive sexuality education: click here (also in Russian, click here).
- Want to change the world? Here’s how…young people as advocates: click here.
- Understanding young people’s Right to Decide: click here.
- Compendium on young people’s SRHR policies in Europe: click here.
- Interview with Doortje Braeken on CSE in the Guardian: click here.
- IPPF EN youth training modules: click here (also in Russian, click here).
- Check out the website of IPPF and IPPF EN (for Russian click here) for other interesting publications and resources.

Resources from Sensoa – Belgium MA
- Educational module linked to the museum exposition (‘k Zag 2 beren): click here (In Flamish but with visual handouts).
- Flag system – talking with children and young people on sex and unacceptable sexual behavior: click here.
- Website all about sex: www.allaboutsex.be

Other resources:
- It’s All One Curriculum: click here.
- WHO Europe and BzgA Standards for Sexuality Education in Europe: click here (also in Russian via same link).
- UNESCO International Technical Guidance on Sexuality Education: click here (also in Russian via same link).
- UNESCO study on cost effectiveness of sexuality education in Estonia: click here.
- The Pleasure Project: click here.
Appendix 5: List of links where information about the study session was posted online

Information regarding the Study Session was posted on web-sites and social networks:

- Announcement of the Study Session was posted on the Council of Europe website.
- Daily updates regarding the study session were posted on the YSAFE profile on Facebook https://www.facebook.com/ysafe.network and twitter https://twitter.com/ysafe using the hash tag #ysafeCSE. All tweets are available on the following link.
- Photos from the study session are available here.

Furthermore, participants used their personal Twitter accounts (and the #ysafeCSE) to post information about the Study Session.
Appendix 6: Summary of preparatory work participants

Table 1 - Laws and policies on sexuality education

<table>
<thead>
<tr>
<th>Country</th>
<th>Sexuality education in the formal education system</th>
<th>National government policy</th>
<th>Government implementation plan</th>
<th>Responsible ministry</th>
<th>Responsibility local level</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albania</td>
<td>Yes Law on Reproductive Health (2002)</td>
<td>Yes 2012 Approval of sublaw on models of sexuality education</td>
<td>Yes, a strategy for Reproductive Health (2010 – 2015) of the MoH</td>
<td>Ministry of Health Cooperation with Ministry of Education regarding sexuality education</td>
<td>No Although decentralisation implies local level authorities have to manage financial resources</td>
<td>No budget for prevention education, youth or Reproductive Health</td>
</tr>
<tr>
<td>Armenia</td>
<td>Yes The law on reproductive rights and reproductive health (2002).</td>
<td>Yes Government paper on non-formal education, including Healthy Life skills education (2006).</td>
<td>N/A</td>
<td>Ministry of Education and Science and the Ministry of Culture and Youth</td>
<td>Yes, for implementation of the policies</td>
<td>N/A</td>
</tr>
<tr>
<td>Belgium</td>
<td>No, only Royal decree with cross-curricular and subject related goals (1997)</td>
<td>Yes (1997) Qualification framework with cross-curricular items</td>
<td>No Up to schools to decide. Monitoring is done by NGOs (Sensoa)</td>
<td>Ministry of Education</td>
<td>Yes (Flemish government, not federal government)</td>
<td>No, only for sexual health prevention and promotion activities</td>
</tr>
<tr>
<td>Bosnia &amp; Herzegovina</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Ministry of Education and Science (in Federation of Bosnia and Herzegovina) and the Ministry of Education and Culture (in Republic of Srpska).</td>
<td>Ministries of Education at cantonal level (federation of Bosnia and Herzegovina) make their own decisions</td>
<td>No</td>
</tr>
<tr>
<td>Bulgaria</td>
<td>No Law for school education and standard on Civil, intercultural and health Education are under construction</td>
<td>No Sex ed is included partially in the discipline Biology and Health Education and in Electives on Health and Sexuality Education</td>
<td>Under construction – Ministry of Education</td>
<td>Ministry of Education, Science and Youth</td>
<td>Yes Autonomy of school authorities in the way they conduct health education Regional educational inspection are responsible for methodologies Municipalities are responsible for budget</td>
<td>No</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>No</td>
<td>Yes (2010) Basic sexual education within general goals on education and health</td>
<td>No</td>
<td>Ministry of Education, Youth and Sports</td>
<td>No</td>
<td>No, included in the budget for education. Schools and NGOs can apply for grants for prevention of risk behaviour.</td>
</tr>
<tr>
<td>Denmark</td>
<td>Yes Supportive Since 1970</td>
<td>No only recommendations on the role and responsibilities of the municipalities by the Ministry of Children and Education</td>
<td>Yes Monitoring odne by local governments</td>
<td>Ministry of Children and Education</td>
<td>Yes, overall responsibility for the local schools within a framework provided by the national government</td>
<td>No</td>
</tr>
<tr>
<td>Country</td>
<td>Sexuality education in the formal education system</td>
<td>National government policy</td>
<td>Government implementation plan</td>
<td>Responsible ministry</td>
<td>Responsibility local level</td>
<td>Budget</td>
</tr>
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</tr>
<tr>
<td>Macedonia</td>
<td>No</td>
<td>No Included as recommendation in National documents on health issues</td>
<td>National Strategy for Sexual and Reproductive Health, monitored by National Commission and the Institute for Public Health</td>
<td>Divided between Ministry of Health and Ministry of Education</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Poland</td>
<td>Yes Since 1999, Restrictive</td>
<td>No</td>
<td>No Preparation for family life lessons are included in the system of school education and monitored and evaluated but there are no national evaluation standards. Interpretation of quality and content of curriculum depends on regional education advisors</td>
<td>Ministry of National Education</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Romania</td>
<td>No</td>
<td>No Included in health education part of optional school curriculum</td>
<td>No</td>
<td>Ministry of Education, Research, Youth and Sport</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Ministry of Education</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Country</td>
<td>Sexuality education in the formal education system</td>
<td>National government policy</td>
<td>Government implementation plan</td>
<td>Responsible ministry</td>
<td>Responsibility local level</td>
<td>Budget</td>
</tr>
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<td>--------</td>
</tr>
<tr>
<td>Ukraine</td>
<td>Yes Passed during 2004 – 2012</td>
<td>Yes National program ‘Reproductive Health of the Nation for Period till 2015 (2006) and National Program ’Providing HIV prevention, treatment, care and support for HIV-infected and AIDS patients in 2009 – 2013 (2009).</td>
<td>Yes Monitoring of the level implementation of the National Program on preventive education by the M&amp;E center in the Ministry of Education and Science Regular progress reports to the Ministry of Education and to society</td>
<td>Ministry of Education</td>
<td>Yes Regional/district/city administrations are responsible for the implementation of the regulations of the Ministry of Education.</td>
<td>No Included into the budgets for HIV prevention, Basics for Health program etc.</td>
</tr>
<tr>
<td>Uzbekistan</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Ministry of Health</td>
<td>No</td>
<td>No</td>
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</table>
Table 2 - Implementation and content

<table>
<thead>
<tr>
<th></th>
<th>Minimum standards</th>
<th>Integration in curriculum</th>
<th>Age group</th>
<th>Teacher training</th>
<th>Link to information on services</th>
<th>Development of curriculum</th>
<th>Input young people</th>
<th>Responsible for provision</th>
<th>Involvement NGOs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Albania</td>
<td>No</td>
<td>In Biology, Health education and Life Skills</td>
<td>12-18</td>
<td>Only by NGOs</td>
<td>No</td>
<td>Ministry of Education and Institute of Curriculum</td>
<td>No</td>
<td>School teachers (biology)</td>
<td>Yes, sexuality education sessions at schools (with permission)</td>
</tr>
<tr>
<td>Armenia</td>
<td>N/A</td>
<td>As a separate facultative subject in selected general schools</td>
<td>15-17</td>
<td>Yes</td>
<td>No</td>
<td>Ministry of Education</td>
<td>N/A</td>
<td>School teachers</td>
<td>Yes, in peer education, behavior change communication and dissemination of IEC materials</td>
</tr>
<tr>
<td>Belgium</td>
<td>Yes</td>
<td>In the cross-curricular subjects</td>
<td>3-18</td>
<td>Included in some teacher schooling. Training are offered by NGOs but up to teachers themselves</td>
<td>Yes</td>
<td>Schools choose their own curriculum based on the qualifications framework</td>
<td>Yes (asked to evaluate the curriculum)</td>
<td>Schools, youth advisory centers</td>
<td>Yes</td>
</tr>
<tr>
<td>Bosnia and Herzegovina</td>
<td>N/A</td>
<td>In Biology and Healthy Lifestyles</td>
<td>13-18</td>
<td>No</td>
<td>Only in information provided by NGOs</td>
<td>Working group, including Ministry of Education, young people and NGOs developed a curriculum on Healthy Lifestyles (2013).</td>
<td>Yes</td>
<td>Schools teachers (if adopted by schools).</td>
<td>Yes, in Peer Education and linking to services</td>
</tr>
<tr>
<td>Bulgaria</td>
<td>No</td>
<td>In Biology and optional health education classes</td>
<td>12-19</td>
<td>Only by NGOs</td>
<td>Only in peer education by NGOs</td>
<td>Teachers, school nurses and peer educators from NGOs</td>
<td>Yes</td>
<td>Biology teachers, school nurses and peer educators from NGOs</td>
<td>Yes, in peer education and awareness raising events</td>
</tr>
<tr>
<td>Czech Republic</td>
<td>Yes</td>
<td>Defined in the document 'Framing Educational programmes'. Currently under revision</td>
<td>Officallly from age of 7 (in reality between 14-21 years)</td>
<td>Not required, only if interested</td>
<td>No</td>
<td>Ministry provides the framework but implementation is up to schools and teachers</td>
<td>No</td>
<td>School teachers</td>
<td>Yes, in peer education and teacher training, lectures for youth, lectures on HIV etc.</td>
</tr>
<tr>
<td>Denmark</td>
<td>Yes</td>
<td>In health and sexuality education as well as family life education. Up to school boards to decide on location in class. Mostly linked to biology and Danish lessons.</td>
<td>6-16 (all grades)</td>
<td>No (only voluntarily)</td>
<td>Only additional material from NGOs</td>
<td>Ministry of Children and Education</td>
<td>Yes</td>
<td>School teachers and school nurses</td>
<td>Yes, supplementary education provided by NGOs as well as monitoring of sexuality education, teacher training and development of educational material</td>
</tr>
<tr>
<td>The former Yugoslavia</td>
<td>Framework for CSE.</td>
<td>Topics are covered in different</td>
<td>No</td>
<td>Limited</td>
<td>Ministry of Education,</td>
<td>No</td>
<td>Schools Also Centres</td>
<td>Yes, in peer education</td>
<td></td>
</tr>
</tbody>
</table>

41
<table>
<thead>
<tr>
<th>Country</th>
<th>Development of topics</th>
<th>Link to Information on Services</th>
<th>Development of the Curriculum</th>
<th>Input Young People</th>
<th>Responsible for Provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Macedonia</td>
<td>topics are covered in different years of schooling</td>
<td>no only in NGO sessions</td>
<td>Ministry of National Education and Teachers</td>
<td>No</td>
<td>Teachers, school nurses and trained sex educators</td>
</tr>
<tr>
<td>Poland</td>
<td>Yes</td>
<td>Part of preparation for family life</td>
<td>No</td>
<td>Ministry of National Education and Teachers</td>
<td>No</td>
</tr>
<tr>
<td>Portugal</td>
<td>Yes</td>
<td>Generally in the curriculum</td>
<td>Yes</td>
<td>Ministry of Education guidelines and guidelines working group on sexuality education and health. Schools implement themselves</td>
<td>No</td>
</tr>
<tr>
<td>Romania</td>
<td>No Only in teacher courses</td>
<td>Into Health Education</td>
<td>Yes</td>
<td>Ministry of Education, Research, Youth and Sports</td>
<td>No</td>
</tr>
<tr>
<td>Tajikistan</td>
<td>No</td>
<td>Planned to be incorporated as separate subject on Healthy Lifestyles, including sexuality education</td>
<td>No</td>
<td>Ministry of Education, UNFPA</td>
<td>Yes</td>
</tr>
<tr>
<td>Ukraine</td>
<td>Yes For subject 'Basics of Health' New state standards on preventive education for secondary schools developed in 2012 (based on WHO standards on sexuality education)</td>
<td>Integrated into 'Basics of Health'. Also components in Biology, Ethics, Basic of Law and Physical culture. Extracurricular lessons developed mostly by NGOs on HIV, Healthy Lifestyles etc.</td>
<td>No, only possibilities for schools to organize meetings for students of secondary and high schools with medical specialists</td>
<td>Ministry of Education Schools can chose and provide their elective courses</td>
<td>No</td>
</tr>
<tr>
<td>Uzbekistan</td>
<td>No</td>
<td>Generally in the curriculum</td>
<td>No</td>
<td>Ministry of Health and Ministry of Education</td>
<td>No</td>
</tr>
</tbody>
</table>

**Minimum Standards Integration in Curriculum Age groups Teacher training Link to information on services Development of the Curriculum Input Young People Responsible for provision Involvement NGOs**

| Poland | Yes | Part of preparation for family life | 11-19 | Yes Postgraduate diploma required | No, only in NGO sessions | Ministry of National Education and Teachers | No | Teachers, school nurses and trained sex educators | Primarily in teacher training and student workshops |
| Portugal | Yes | Generally in the curriculum | 5/6-18 | Yes Organised by schools, teacher training centres | No | Ministry of Education guidelines and guidelines working group on sexuality education and health. Schools implement themselves | No | Schoolteachers | Yes |
| Romania | No Only in teacher courses | Into Health Education | >13 | Yes Training in health promotion | No | Ministry of Education, Research, Youth and Sports | No | Schoolteachers | Yes, peer education and education via internet |
| Tajikistan | No | Planned to be incorporated as separate subject on Healthy Lifestyles, including sexuality education | 14-18 | No | Yes | Ministry of Education, UNFPA | Yes | School teachers, NGOs, international organisations | Yes, by trainings, workshops and informational campaigns |
| Ukraine | Yes For subject 'Basics of Health' New state standards on preventive education for secondary schools developed in 2012 (based on WHO standards on sexuality education) | Integrated into 'Basics of Health'. Also components in Biology, Ethics, Basic of Law and Physical culture. Extracurricular lessons developed mostly by NGOs on HIV, Healthy Lifestyles etc. | 6-18 | Yes | No, only possibilities for schools to organize meetings for students of secondary and high schools with medical specialists | No | Ministry of Education Schools can chose and provide their elective courses | No | School teachers, school psychologists, social pedagogues | Yes, but only if they are certified to conduct MoE programmes |
| Uzbekistan | No | Generally in the curriculum | 15-25 | No | Yes, to clinical services | Ministry of Health and Ministry of Education | No | Regional doctors | Yes, by conducting seminars, trainings and info sessions |
Appendix 7: Template Action plan

Name: 
Country: 
What do you aim to achieve (top of the ladder)?
What is the primary message (developed during day 3)?
How is this action linked to your MA’s work?

<table>
<thead>
<tr>
<th>What actions are needed to achieve your aim?</th>
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<th>3</th>
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<tbody>
<tr>
<td>What would be the results of this activity?</td>
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<td>How will you do this?</td>
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<td>Who is responsible?</td>
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<td>Who do you need to make this happen?</td>
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<td>Support needed from YSAFE/IPPF</td>
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<td>Resources Needed?</td>
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<td>What is the timeframe of the activity?</td>
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<td>How do you know you are successful?</td>
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