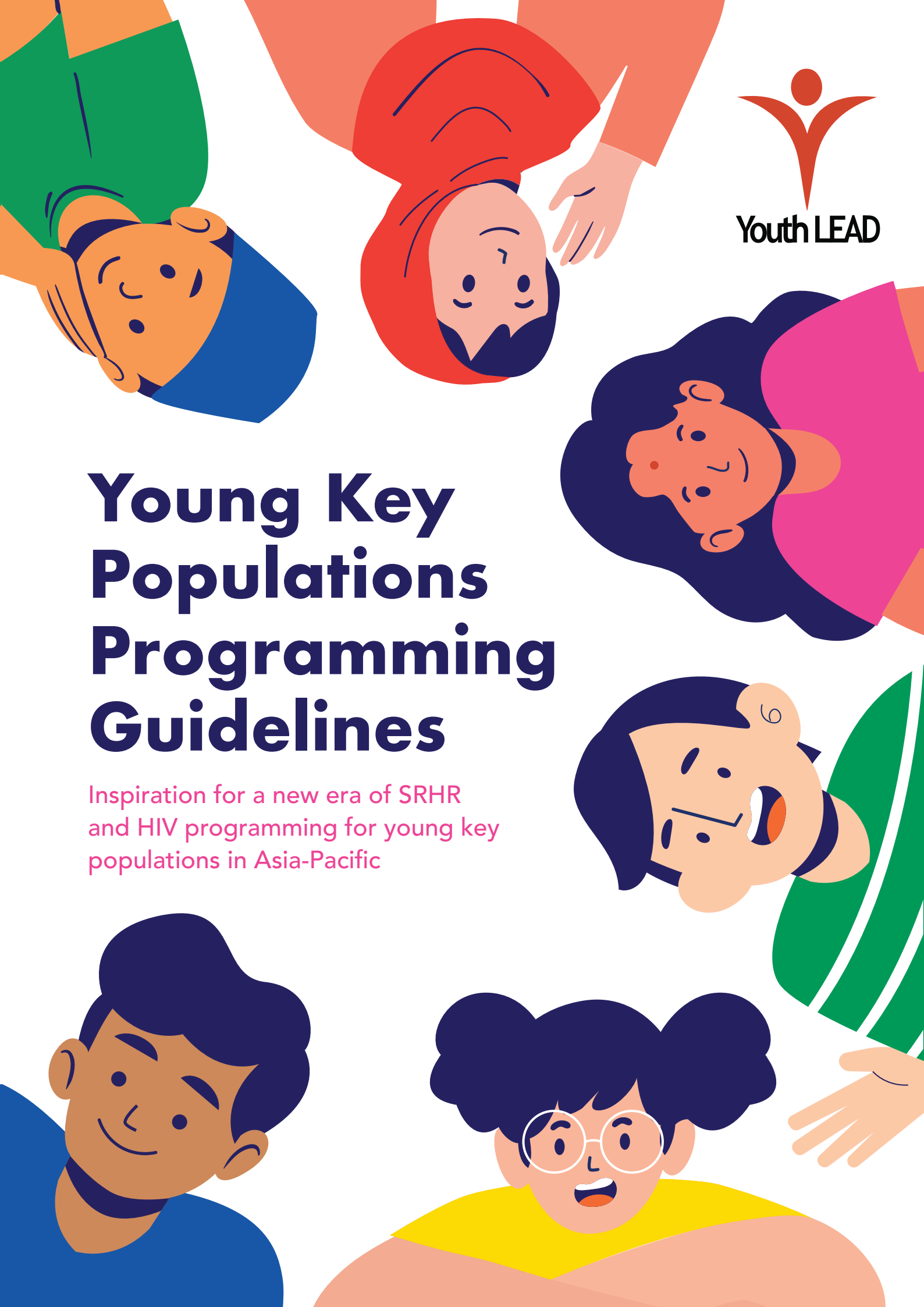




Young Key Populations Programming Guidelines

Inspiration for a new era of SRHR and HIV programming for young key populations in Asia-Pacific



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Main authors

Kat Watson and Arushi Singh

Contributing authors

Eddy Rudram, Gaj Gurung and Ikka Noviyanti

Design and layout

Nattawarath Hengviriyapanich

Youth LEAD, Asia Pacific Network of Young Key Populations

75/20 Ocean Tower 2, 17th Floor
Soi Sukhumvit 19, Khlong Toey Neua, Khet Wattana
Bangkok, 10110
Thailand

www.youthleadap.org
info@youth-lead.org

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ACKNOWLEDGEMENTS

The production of these Guidelines was an enormous team effort. Whilst the writing was led by Katherine Watson and Arushi Singh (international SRHR consultants), their primary job was to translate the realities, opinions and perspectives of Youth LEAD's many members and partners into words on a page. There are several individuals who deserve to be thanked individually for their outstanding contributions:

Đoàn Thanh Tùng (Lighthouse, Vietnam) worked in his capacity as a youth consultant for Youth LEAD, coordinating research in Vietnam as well as commenting on draft versions. He has a keen sense of justice and expansive knowledge of YKP's rights that were vital to these Guidelines' development.

Eddy Rudram (Youth LEAD, Thailand) worked in his capacity as Communications Officer for Youth LEAD. He helped the team visualize how the Guidelines could be designed as well as provided vital input based upon his academic background in identity and intersectionality.

Gaj Gurung (Youth LEAD, Thailand) worked in his capacity as Youth LEAD's Regional Coordinator to ensure that all members who wanted to be involved in the Guidelines' development could be. He is an inclusive leader who ensured that this

project remained at the top of the agenda for his region!

Ikka Noviyanti (Youth LEAD, Thailand) worked in her capacity as Advocacy Officer to collect relevant case studies from countries and Youth LEAD members across the region. Her persistence in ensuring the equal representation of all YKP groups in the Guidelines ensured an inclusive approach.

There were also a great number of young people from across the region who participated in large and small ways in the development of these Guidelines. Participants of the two consultations held in Bangkok, Thailand - one on 1 June 2018 and another on 29/30 October 2018 - should be thanked for taking the time to travel and give of their knowledge and experiences. The full list of names of these participants can be found in Annex 6.

Three young researchers deserve much gratitude for their in-country research: Luh Putu Ari Dewiyanti in Indonesia; Dr. Min Thet Phyo San in Myanmar and Luc Quach Binh Duong in Vietnam. They put in extraordinary effort to conduct in-depth interviews with YKP and stakeholders, as well as a survey, that provided invaluable insight.

Thanks are also due to the following external reviewers: Anand Chabungbam (Regional Coordinator, ANPUD), Dr Jo Sauvarin (Adviser on Adolescents and Youth, UNFPA APRO), Noah Metheny (Community Engagement Lead, Strategic Initiative, Global Fund), Ed Ngoksin (Key Populations Advisor, Global Fund), Michela Polesana (Communication Advisor, UNAIDS RST), Stuart Watson (Senior Advisor - Community Support, Social Justice and Human Rights, UNAIDS RST), Shirley Mark Prabhu (UNICEF EAPRO), Jamie Uhrig (Independent consultant), Justin Francis Bionat (Youth Voices Count), Pham Nguyen Ha (Deputy Director, Vietnam Union of Science and Technology Associations – Global Fund supported project on HIV/AIDS in Vietnam), Dr Ramona (CDC Vietnam), and Greg Grey (Country Lead, SKPA Program, Australian Federation of AIDS Organisations).

Last, but not least, the allies, programmatic partners and funders of Youth LEAD need to be thanked for their participation in the consultations (see Annex 6) as well as their meticulous review of the Guidelines. The Guidelines would not have been possible without financial support from UNFPA Asia Pacific Regional Office, the Global Fund CRG Strategic Initiatives and Technical Assistance Grant and the Robert Carr Fund. Thanks to UNICEF East Asia Regional Office, UNAIDS Regional Support Team and the members from Asia Pacific IATT (Inter-Agency Task Team) members for the technical support. And finally, thanks to Asia Catalyst for facilitating the Global Fund Technical Assistance grant.



ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
AMA	AIDS Myanmar Association
APCOM	The Asia Pacific Coalition on Male Sexual Health
APN Plus	Asia Pacific Network of People Living with HIV
APPC	Asian and Pacific Population Conference
APTN	Asia Pacific Transgender Network
ART	Antiretroviral therapy
ASEAN	Association of Southeast Asian Nations
CBO	Community-based organisation
CEDAW	Convention on the Elimination of Discrimination against Women
CRC	Convention on the Rights of the Child
CSE	Comprehensive sexuality education
CSO	Civil society organisation
ESCAP	Economic and Social Commission for Asia and the Pacific
HIV	Human immunodeficiency virus
HTC	HIV testing and counselling
HYLEF	HIV Young Leaders Fund
IATT	Asia Pacific Inter-Agency Task Team on Young Key Populations
ICESCR	International Covenant on Economic, Social and Cultural Rights
ICT	Information Communication Technology
IEC	Information, Education and Communication
IGM	Intergovernmental Meeting

ILGA	International Lesbian, Gay, Bisexual, Trans and Intersex Association
IPPF	International Planned Parenthood Federation
LGBTQI	Lesbian, Gay, Bisexual, Trans*, Queer, Intersex
MSM	Men who have sex with men
MYS	Myanmar Youth Stars
NGO	Non-government organisation
NSP	Needle and syringe programme
OST	Opioid substitution therapy
PMTCT	Prevention of mother-to-child transmission
PoA	Plan of action
PrEP	Pre-exposure prophylaxis
PWID	People who inject drugs
RHRN	Right Here Right Now
ROLi	River of Life Initiatives
SAARC	South Asian Association for Regional Cooperation
SOGI/E	Sexual orientation and gender identity/expression
SRHR	Sexual and reproductive health and rights
SRI	Sexual Rights Initiative
SRR	Sexual and reproductive rights
STI	Sexually transmitted infection
TB	Tuberculosis
TG	Transgender
UN	United Nations
UNAIDS	Joint United National Programme on HIV & AIDS

UNDP	United National Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNODC	United Nations Office on Drugs and Crime
UPR	Universal Periodic Review
WHO	World Health Organisation
YKP	Young key populations
YLO	Youth-led organisation
Y-PEER	Youth Peer Education Network
YPLHIV	Young people living with HIV
YPUD	Young people who use drugs
YVC	Youth Voices Count





INTRODUCTION

In 2019, there are 5.8 million people living with HIV in the Asia Pacific region and, during that same year, there were 300,000 new infections and 120,000 AIDS-related deaths.¹ Whilst there are huge variations between countries in the region in terms of scale and response, the HIV epidemic is characterized by a growing concentration amongst key populations, including young key populations (YKP).² Whilst there is little data on the situation of YKP specifically, in 2018 it was estimated that there were 390,000 young people aged 15 to 24 living with HIV in the Asia Pacific region; in the same year, 82,000 were newly infected and 4,600 died of AIDS-related illness.³ Research shows that there are many reasons behind the increased risk experienced by YKP, including:

- the SRHR issues of YKP remained overlooked in programming;

- restrictive laws contribute to the marginalization and discrimination of YKP;
- stigma remains a huge barrier in accessing health services for YKP; and
- comprehensive sexuality education, both in and out-of-school remained inaccessible.⁴

Despite the challenges faced by YKP in the Asia Pacific, there is still a lack of comprehensive programming guidance that addresses their needs and rights specifically. There are many toolkits, guidelines and briefs from key population networks, UN agencies, funders and implementing organisations that focus on the needs of key populations generally, i.e. people who use drugs, men who have sex with men, trans* people, and sex workers. The young key populations (YKP) technical briefs developed by WHO, whilst important advocacy documents, do not necessarily address the Asia Pacific region specifically.

Whilst there is a need for more guidance

1 AVERT (2020) HIV AND AIDS in Asia and the Pacific - Regional Overview. Available at: <https://www.avert.org/professionals/hiv-around-world/asia-pacific/overview>

2 AVERT (2020) HIV AND AIDS in Asia and the Pacific - Regional Overview. Available at: <https://www.avert.org/professionals/hiv-around-world/asia-pacific/overview>

3 YouthLEAD (2015) 'Our Rights Matter Too': *Sexual and Reproductive Health and Rights (SRHR) of Young Key Populations in Asia and the Pacific*; UNAIDS YKP Data Hub

4 Youth LEAD (2015) Make Comprehensive Sexuality Education Inclusive of Young Key Population: Policy Brief. (Not available online). Contact info@youth-lead.org

that is specific to the Asia Pacific region and YKP, the ongoing, inspiring work of youth-led organisations using innovative approaches to reach YKP must be recognized and drawn upon. *Young Key Populations Programming Guidelines: Inspiration for a new era of SRHR and HIV programming for young key populations in Asia-Pacific* (hereinafter referred to as the 'Guidelines') aims to support organizations to implement programmes

that address the realities and rights of YKP in Asia Pacific. The guidance provided herein is grounded in the experiences of a diversity of YKP and aims to introduce creativity, critical thinking and inspiration to the sector.











Objectives

The objectives of the Guidelines are:

- to highlight the unique needs of young key populations in the Asia-Pacific region;
- to promote sharing, learning, reflection and critical thinking and to inspire the development of comprehensive regional and national programmes for the SRHR, including HIV, of YKP in the Asia-Pacific region; and
- to be a loose guide for developing proposals relating to programming for YKP in the Asia-Pacific region for different donors, including the Global Fund.

In light of existing toolkits and guidelines and the abovementioned objectives, it is worth being clear on what these Guidelines do and what they do not do. This is summarized in the table below.

TABLE 1: WHAT DO THE GUIDELINES DO AND NOT DO?

The Guidelines do...	The Guidelines do not...
 Provide overall guidance and inspiration on YKP programming, as well as relevant case studies, resources and organisations for further investigation	 Provide detailed technical guidance on services for YKP that is already found in other publications
 Encourage users to use critical thinking that will result in a better understanding of what YKP programming should look like in any given context	 Prescribe a one-size-fits-all approach to programming for YKP
 Complement existing global and regional toolkits on YKP	 Replace technical or programmatic guidance provided by other organisations
 Focus primarily on experiences and resources from the Asia-Pacific region	 Assume that Asia-Pacific is a homogeneous region
 Share perspectives of YKP, ensuring that their voices are at the centre of all guidance, recommendations and case studies	 Assume that the YKP consulted for the Guidelines represent all YKP in the region

Audiences

The Guidelines bring together key learnings in a youth-friendly manner to ensure that all audiences can use it effectively. It was developed with a variety of audiences in mind, including (but not limited to) YKP-led organisations; adult-led organisations working with key populations that wish to integrate youth work; NGOs that provide services, education or other support to YKP; and government agencies with mandates to reach vulnerable, marginalized and hard-to-reach populations with SRH, HIV and other support services. In short, these Guidelines are for implementers of all sorts in the Asia Pacific. The Guidelines does not hold all the answers for all questions for all stakeholders; rather, the hope is that it is a starting point for critical thinking and inspiration for a new era of programming.

Structure

The Guidelines have been written without any assumptions as to users' current YKP programmes. It may be that users are starting from scratch or wish to use the Guidelines as a way to review their existing work with a fresh perspective. In the first four sections, users are asked to think about the foundations that make for solid YKP programmes; these are approaches that should be integrated throughout an organisation, not just in relation to YKP-specific programmes. In the second part of the Guidelines, users will find various components related to programming. Whilst it is recommended that the Guidelines be read in its entirety to understand the 'bigger picture,' users may pick and choose the sections that are most useful to their current programmes if time is short.

The Guidelines adopts a three-pronged approach throughout, which is used to organise all of the information. The first prong is '**SHARE AND LEARN**'; these sections provide a summary of critical information and signposting of relevant resources for YKP in the region. The second prong is '**REFLECT AND QUESTION**.' Users are given a variety of conversation starters and critical thinking questions; each list is merely a

beginning and is not an exhaustive list of all the questions that should be or could be asked. The last prong is '**INSPIRE AND IMPROVE**.' This third part acknowledges the amazing work that is already ongoing in the Asia Pacific. Case studies are provided from YKP projects from across the region to inspire and provide real-life examples of good programming in practice.

How to use

Youth LEAD envisions these Guidelines being a starting point for a range of activities, including (but not limited to) developing workshops, training, writing funding proposals, reviewing programmes, starting discussions and, of course, inspiring change. The idea is that users can 'cherry-pick' the relevant parts of these Guidelines to support their particular needs. For example, if you are leading a workshop with a new partner organisation that will work with you on service delivery, perhaps you want to go through the 'Foundation' sections with them and then pull information from the 'Design a Programme' section too. Another example: if you are developing a monitoring framework for a new project with a donor, you might wish to take inspiration from what other YKP organisations have done in the 'Programming 5' section towards the end. The possibilities are endless!

To support workshop development, there are two sample slide decks available as well as a sample workshop agenda. These can be requested from Youth LEAD.

Methodology

Data were collected from a number of different sources to inform the development of these Guidelines, including regional consultation, literature review, survey, in-country research conducted by three young researchers, case study development, and a validation workshop.

The internal review process was conducted with participants of the consultations in June and October 2018. A draft of the Guidelines was sent

to them for comment. They sent written feedback by email and some joined feedback Skype calls to give their comments. After this internal review, the Guidelines were shared with a group of external stakeholders. A template for feedback

was created and shared with the stakeholders, who were asked for written feedback on the sections most closely aligned with their own areas of expertise. Both internal and external review feedback was integrated into the Guidelines.

TABLE 2: DATA SOURCES

Source of information	Process
Regional consultation (1 June 2018)	YouthLEAD and the consultant team conducted a consultation with young key populations from across the Youth LEAD network as well as regional stakeholders. This consultation was designed to collect data from the first-hand experiences of YKP in Asia-Pacific; to consult with YKP in Asia-Pacific on the validity of existing approaches for advancing rights and health in the region, and to pinpoint key areas of guidance and recommendations for people working with and for YKP in Asia-Pacific.
Literature review	The consultant team undertook a review of existing literature on young key populations in the Asia-Pacific Region, focusing on publications by UN agencies, international NGOs, and YKP-led networks and organisations. The young participants at the first consultation were asked to share the resources that they found most useful, which provided an initial review list combined with the publications that Youth LEAD itself uses.
Regional survey on YKP	A survey was designed for individual members and affiliates of Youth LEAD, to share their opinions and perspectives on programming for YKP, as well as YKP realities with regard to their sexual and reproductive health and rights. It was disseminated through Survey Monkey and a total of 13 completed responses were received from 6 different countries. Youth LEAD sent the survey to all of its network members and disseminated the link through its social media outlets.

Source of information	Process
In-country research	<p>In-country research was done by young consultants in Indonesia, Myanmar, and Vietnam. These countries were chosen because of the large number of YKPs within the existing networks, as well as the fact that many in these countries were not able to respond to the regional survey due to language barriers. The research was done through surveys as well as key informant interviews in the local languages. The total number of survey respondents were:</p> <ul style="list-style-type: none"> • Indonesia: 27 respondents • Myanmar: 11 respondents • Vietnam: 8 respondents <p>The total number of key informant interviews conducted were:</p> <ul style="list-style-type: none"> • Indonesia: 6 key informants from 5 organizations - Linkages, UNICEF, UNFPA, Indonesia AIDS Coalition and Ministry of Health. • Myanmar: 8 key informants - 3 from International NGOs (Alliance Myanmar, Marie Stopes International, TOP Center), 2 from UN agencies (UNAIDS, UNESCO), 1 Senior Consultant working for adolescent health and 2 from Key Population Organization. • Vietnam: 1 key informant from the Global Fund
Case studies	<p>A format was developed for the collection of case studies highlighting promising practices. These case studies were collected through the Youth LEAD network with a focus on programmes run by and for YKP in Asia-Pacific.</p>
Validation workshop (29-30 October 2018)	<p>Once a draft framework for the Guidelines was developed, based on the literature review, inputs from the regional consultation, and preliminary results from the survey and in-country research, a validation workshop was held with young key populations from across the Youth LEAD network as well as regional stakeholders. This meeting aimed to validate the draft Guidelines and receive additional inputs and insights to finalise it; discuss additional data and information required for the Guidelines; and receive a commitment of support for the implementation of the Guidelines from the stakeholders, including but not limited to, governments, regional and national key populations, PLHIV networks, YKP networks, UN agencies, technical partners, and funding agencies.</p>

FOUNDATION 1



PARTNER WITH YKP

Share and learn

It's a simple concept that has been the rallying cry of countless groups throughout history: 'nothing for us, without us.' Programming for YKP is no different. Young key populations deserve the opportunity to define what their needs are and how those needs are addressed through programming. More than that, it is their right to participate in decisions that affect them. While many agencies attempt to fund or implement programmes for YKP without consulting them in a meaningful manner, there are some examples of working in partnership with YKP in the region, which we have highlighted throughout these Guidelines.

It is important to note that, when it comes to young people and YKP in particular, meaningful participation and leadership in matters affecting them can be a protective factor. Being consulted means that YKP have the opportunity to flag the challenges and barriers they experience, whilst also suggesting solutions that are feasible in their respective contexts.

Models of programming that involve young people fall somewhere on the continuum of tokenistic engagement to meaningful leadership, depending upon the extent to which they provide freedom of choice, information, voice, responsibility and decision-making power to young people.⁵ Often, the way in which young people are involved in programmes evolves over time. For example, an adult-led organisation may start out merely consulting young people without giving them actual decision-making power; over time, this may evolve into a partnership between young people and adults in which both have an equal voice.

'To determine the policy on an issue, [a] representative is needed from the issue subject.'

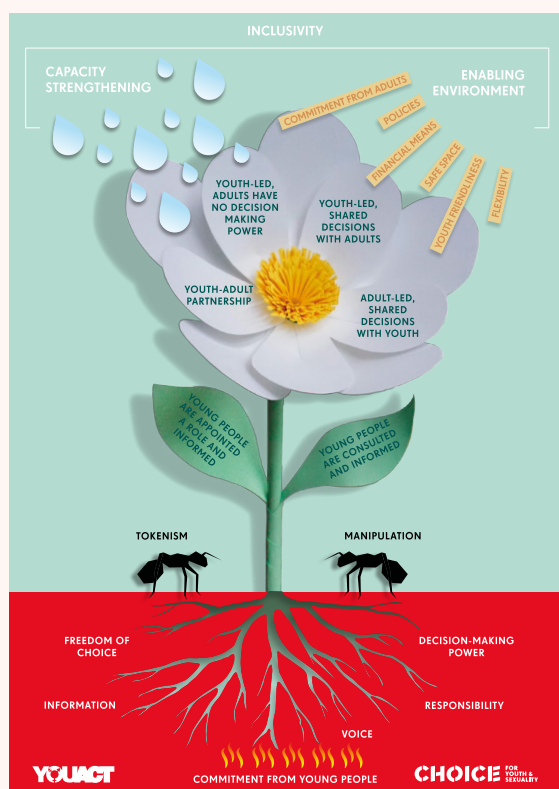
Young MSM (West Java, Indonesia)

⁵ CHOICE (no date) *The Flower of Participation*

Models of programming that involve young people fall somewhere on the continuum of tokenistic engagement to meaningful leadership, depending upon the extent to which they provide freedom of choice, information, voice, responsibility and decision-making power to young people. Often, the way in which young people are involved in programmes evolves over time. For example, an adult-led organisation may start out merely consulting young people without giving them actual decision-making power; over time, this may evolve into a partnership between young people and adults in which both have an equal voice.

Not all partnerships are designed in the same manner, nor are all partners always given an equal number of tasks or responsibilities within a partnership. Partnership means that each partner - whether youth- or adult-led - contributes according to its strengths and mandate, whilst also recognizing the strengths and mandate of the other. Some considerations for formulating new youth-adult partnerships are explored in more detail below.

FIGURE 1: FLOWER OF PARTICIPATION



The figure of the 'Flower of Participation' demonstrates the different ways in which adults or organisations involve young people. The roots of the flower, or the principles on which youth-adult partnership should be built, are for young people to have the freedom of choice, decision-making power, adequate information that enables them to make the choices or decisions, responsibility, and voice so that they can express themselves freely and without judgement.

Involving young people tokenistically, e.g. having one young person on stage, or getting young people to sing a song during a meeting, or using their involvement merely for ulterior motives, e.g. to obtain funding, is not meaningful youth participation. Often, organisations or programmes that are beginning to involve young people meaningfully will start with consulting them or appointing them to a role and informing them of what they are meant to do (refer to the leaves of the flower). As youth-adult partnerships evolve, they turn into one or other of those depicted on the petals depending on the objectives of the partnership. Like all partnerships, youth-adult partnerships (of any design) require an effort to build and maintain (refer to the sun's rays).

TABLE 3: TOKENISTIC V MEANINGFUL PARTNERSHIP WITH YOUNG PEOPLE

Examples of tokenistic partnership	Examples of meaningful partnership
<ul style="list-style-type: none"> • Having youth present but with no clear role • Assigning to youth tasks that adults do not want to do • Having youth make appearances at conferences or meetings without receiving support and/or capacity building, or without understanding their roles • Having only one young person on a board or council to 'tick the box' of youth participation⁶ 	<ul style="list-style-type: none"> • Working with young people to decide on the most appropriate roles for both young people and adults in any given partnership • Asking young people how they would like to be supported and providing opportunities for their career and personal growth accordingly • Including young people at all levels and in all decision-making bodies relevant to any given programme concerning their rights • Respecting young people's leadership roles and responsibilities • Creating space for youth leadership

Build trust

As with any relationship, building trust between YKP-led organisations and adult-led organisations is of utmost importance. A starting point for building that trust is to recognize the shortcomings of previous approaches to youth participation, as well as acknowledging any abuses of power in the past. These must come to light and amends made before forging ahead. Trust is also built through mutual understanding. Potential partners should spend time getting to know each other's strengths and weaknesses, and learn to operate without judgement towards each other.

'[A] donor usually has [its] own purpose on the given program. Young key populations [don't] have the bargaining power on the execut[ion].'

Young MSM (West Java, Indonesia)

Acknowledge power differentials

Whilst there are many examples of strong youth-led and YKP-led organisations from Asia-Pacific and around the world, as a general rule adult-led organisations are better funded and wield greater power in decision-making spaces. This power imbalance needs to be recognized and discussed; it is only through acknowledging such imbalances that they can be addressed and changed. One way that adult-led organisations can rectify power imbalances is to use their power to create space and opportunities for YKP in decision-making spaces, including in their own organisations.

Transfer knowledge

Young people may (though not always) have less experience designing, implementing, monitoring and evaluating programmes. Adults may (though not always) be out-of-touch with YKP's realities and the differences that exist for them growing up in a more interconnected, digitalized world. Built into youth-adult partnerships should be opportunities to transfer knowledge between organisations and individuals on a regular basis. This goes both ways and is part of recognizing the added

6 CHOICE (no date) *The Flower of Participation*

value of both youth-led and adult-led efforts to advance YKP rights. Further, programmes should ensure that there are plans in place to transfer knowledge between youth leaders as they age and make space for new youth leaders; this is the joint responsibility of all partners involved.

'It is such a shame in the society, that young key population are treated with stigma and discrimination, I am still encouraging myself and pleased that community organizations are stand with us.'

Young sex worker (Myanmar)

Find common ground

The likelihood is that if two organisations are both working with and for YKP or on issues related to HIV, there is a lot of common ground between them. Articulating what this common ground is - for example, a desire to see the realization of sexual and reproductive rights for all - will help solidify the partnership and enable all partners to work towards a shared vision. This can be done through dialogue or drafting a joint statement of values by which both organisations abide.

Resources

- IPPF (2008) *Participate: The voice of young people in programmes and policies*
- IPPF (2014) *Young at Heart: How to be youth-centered in the 21st century*
- CHOICE (no date) *The Flower of Participation*
- CHOICE (no date) *YOUTH DO IT! Resource Hub*
- UNAIDS (2016) *Ending the AIDS epidemic for adolescents, with adolescents: A practical guide to meaningfully engage adolescents in the AIDS response*
- LinkUp (2016) *Aiming High: 10 Strategies For Meaningful Youth Engagement*
- LinkUp (2016) *Aiming High: Accountability Scorecard*

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- What do our partnerships with YKP look like right now?
- Is our approach to 'work for' or 'work with' YKP?
- Why are the partnerships the way they are?
- Does YKP have an adequate voice in existing partnerships?
- How can we better support YKP leadership through partnerships?
- If YKP are not able to perform certain agreed tasks within a partnership, are they supported to learn and build their own capacity?
- Is our organisation prepared to provide supportive mentorship to YKP through programmes?
- Has our organisation articulated its values with regard to youth leadership?
- Could any area of YKP partnerships be considered tokenistic? Exploitative?
- What does the ideal youth-adult partnership look like in our context?
- What cultural barriers must we overcome in order to have a truly equal partnership between youth and adults in our context?
- Are there examples from our own context that we can look to for inspiration on what a partnership should look like?
- Are there certain groups of YKP that are marginalized in partnership agreements?
- If our organisation is adult-led and working on YKP issues, how do we ensure that we do not make assumptions about their realities?

- If our organisation is adult-led and says that we're pro-youth participation, how do we actually put that commitment into practice?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

- Conduct an audit of your organisation's partnerships with YKP-led organisations to determine their 'health.' Develop criteria for new partnerships with YKP if needed.
- Develop a meaningful youth participation position paper for your organisation, consulting with YKP.
- Do a 'power mapping' to determine how to shift power imbalances and create more space for YKP voices, perspectives and opinions in a range of decision-making spaces.
- Hold a discussion with YKP moderated by a third party. Talk about the way that youth participation has worked in the past; its successes and challenges; how it needs to change in the future; and how YKP and adults want to work together going forward. Document the discussion for future reference and to share with other players in the sector.
- Develop a 'manifesto' outlining principles that both YKP and adult-led organisations abide by, using it as the starting point for designing programmes together and as an accountability tool.



FOUNDATION

2



LEARN THE LINGO

Share and learn

In every language around the world, words are full of meaning, both positive and negative. There are meanings, both plain and hidden, in every word we use. Language can be used to marginalize or create visibility, to discriminate or to empower. When working with YKP, it is important to use language that reflects their humanity and reality.

At times, language creates barriers. Every agency - whether government, donor or implementer - has its own 'lingo,' and those who do not know the lingo may feel left out. Whilst language should be allowed to evolve, every effort should be made to speak plainly and use terminology that is understandable to the widest possible audience. Acronyms that are specific to individual agencies, for example, should be avoided in favour of those that are universally-known. YKP-led organisations and the agencies that work with and for them should engage in continuous dialogue to share advancements in the language being used.

In addition, assumptions about their gender identity and expression based on names or physical appearance should be avoided. The concept of gender is ever-evolving and so is each person's gender identity. Some people use non-traditional pronouns. Someone's name and

pronouns may change after you have already been introduced to the person. Some people use more than one set of pronouns for themselves. It is preferable to use gender-neutral pronouns like 'they' in English when referring to people who have not explicitly stated their preference. This contributes to an inclusive and respectful environment. Using an inappropriate gender pronoun and/or misgendering another person can make that person feel unwelcome, invisible or unsafe within the community. It is always better to ask which is a person's preferred pronoun, rather than guess.

In Annex 1 is a list of (current) terms commonly used when working with and for young key populations (YKP) in Asia-Pacific. These are the formal terms and definitions which should be used, as well as terms to avoid. Both lists have been drafted in consultation with YKP.

People





It goes without saying that young people who identify with one or more key population groups are human beings with multiple, overlapping identities. Their identities go beyond HIV; they go beyond sex; they go beyond sexual orientation and gender identity. For these reasons, it is

preferable to say 'young person who...'; this language construction recognizes that, first and foremost, each young person is human with intersecting identities that go beyond one or another key population group. Do note that some documents (including this one), organisations, or people may refer to shorter versions of these terms such as 'sex worker', 'drug user', trans* person/transgender, etc. The usage of these terms should be context-dependent and, as is the case with these Guidelines, take into account the preferences of YKP.

'I have to conceal my status (my homosexual behaviour) because my family and relatives do not allow me to live as gay. Our rights are still denied by the environment, school and workplace.'

Young sex worker (Myanmar)

TABLE 4: YKP PREFERRED TERMINOLOGY

Preferred terms	Definition/explanation	Terms to avoid
 Young key populations (YKP)	Young key populations are defined as groups of young people (ages 15 to 24) who are more likely to be exposed to HIV or to transmit it, due to specific behaviours or vulnerabilities, and whose engagement is critical to a successful HIV response. In all countries, key populations include people living with HIV. In most settings, (young) men who have sex with men, (young) people who use drugs, (young) people who sell sex, and (young) people who identify as trans*, are key populations. They often have legal and social issues related to their behaviours and age that increase their vulnerability to HIV. ⁷	 Young people at high risk of HIV; high-risk youth
 Young people engaged in selling sex	This term refers to young people aged 15 - 24 who are engaged in selling sex. The term 'engaged in selling sex' is intended to be inclusive of all young people selling sex regardless of how they identify themselves, whether as young sex workers, victims of sexual exploitation, or local variations such as temple-dedicated devadasis as in some Indian states or as participants in 'compensated dating,' known as enjo-kōsai in East Asia. ⁸	 A prostitute; whore, slut, thot, street trash

⁷ WHO et al (2015) *Technical brief: HIV and Young people who sell sex*; UNAIDS (2010) *UNAIDS Strategy 2011–2015: getting to zero*

⁸ Conner B, Mago A, Middleton-Lee S (2014) *Sexual and reproductive health needs and access to health services for adolescents under 18 engaged in selling sex in Asia Pacific*

Preferred terms	Definition/explanation	Terms to avoid
✓ Young people who use/inject drugs	This term refers to young people aged 15-24 who use drugs, including injecting drug use.	✗ Druggie; Junkie, meth-head, crack-whore
✓ Young people who identify as trans*	<p>This term refers to young people aged 15-24 who identify in a gender other than the one that matches the sex they have been assigned (usually at birth).</p> <p>In relation to HIV transmission, transwomen (i.e. those who were assigned male at birth but identify as and/or have transitioned partially or fully to female) are more vulnerable to and likely to contract HIV.^{9,10}</p>	✗ Tranny, she-male, lady-boy (depending on region)
✓ Young men who have sex with men	Young men who have sex with men (MSM) is an inclusive public health term used to define the sexual behaviours of males aged 15-24 having sex with other males, regardless of gender identity, motivation for engaging in sex or identification with any or no particular 'community'. The words 'man' and 'sex' are interpreted differently in diverse cultures and societies as well as by the individuals involved. As a result, the term MSM covers a large variety of settings and contexts in which male to male sex takes place. ¹¹ MSM is commonly used to describe behaviour and may/or may not necessarily correlate to the person's romantic or emotional attractions.	✗ Homo; faggot, fairy, poofa, sissy, bender
✓ Young people living with HIV	This refers to young people aged 15-24 who have an HIV positive status.	✗ HIV positive young person; HIV carrier; HIV infected

9 UNDP (2012) *Lost in Transition: Transgender People, Rights and HIV Vulnerability in the Asia-Pacific Region*

10 WHO & APTN (2013) *Regional assessment of HIV, STI and other health needs of transgender people in Asia and the Pacific*

11 APCOM (no date) *About APCOM*

TABLE 5: CULTURALLY SPECIFIC TERMINOLOGY

Being culturally specific

It is important that YKP are comfortable with the terms used to describe or label them in any given programme. In the Asia Pacific region, these terms vary considerably between contexts. The below text is taken from Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities, and the table below provides a list of terms that YKP themselves deem appropriate and inappropriate in their respective contexts.

‘In this region, some culturally specific terms have very long histories and are best understood within their evolving cultural context. They should not simply be translated as trans women or trans men and, in some cases, the term “third gender” is a closer translation.

The majority of the older culturally or linguistically specific terms apply to people whose sex was assigned male at birth but who do not identify with that sex or gender. Some examples are given below.

Regional terms used for people assigned male at birth who identify as female or as a third gender include the following, for example: hijra and thirunangai (India), khwaja sira (Pakistan), meti (Nepal), kathoey (Thailand), waria (Indonesia), mak nyah (Malaysia), transpinay (the Philippines) and bin-sing-jan and kwaa-sing-bit (Hong Kong) in Asia; and fakafine (Niue), fa’afafine (Samoa and Tokelau), leiti (Tonga), palopa (Papua New Guinea), akava’ine (Cook Islands), whakawahine (New Zealand) and Sistergirl (Australia) in the Pacific.

Regional terms used for people assigned female at birth who identify as male include the following, for example: bandhu (Bangladesh), transpinoy (the Philippines), thirutambi and kua xing nan (Malaysia) in Asia; and fa’afatama (Samoa), tangata ira tane (New Zealand) and Brotherboy (Australia) in the Pacific.’

TABLE 6: YKP DEFINITIONS

Definitions: This box contains definitions of terms commonly used within the HIV, SRHR and SOGIE sectors. Some YKP may self-identify using one or more of these terms, and these identities may be overlapping with one or more of the identities in the table above.

Bisexual: Refers to a person who is emotionally and/or sexually attracted to persons of more than one sex.

Cisgender: A term referring to persons whose gender identity and gender expression match the sex they were assigned at birth and the social expectations related to their gender. It is the opposite term, or antonym, to transgender.

Gender non-conforming: A person whose gender expression does not conform to prevailing societal or cultural expectations of what is appropriate for their gender.

Non-binary: A term used for gender identities that are not exclusively masculine or feminine and are outside of the gender binary.

Queer: This has become an academic term that is inclusive of people who are not heterosexual – includes lesbians, gay men, bisexuals and transgender people. Queer theory is challenging heteronormative social norms concerning gender and sexuality and claims that gender roles are social constructions. For many LGBTI persons, the term 'queer' has negative connotations as it was traditionally an abusive term. However many LGBTI persons are now comfortable with the term and have reclaimed it as a symbol of pride.

Transvestite/cross-dresser: Refers to people who enjoy wearing the clothing of another gender for certain periods of time. Their sense of identification with another gender can range from being very strong and indeed their primary gender, to being a less critical part of their identity. Some transvestite or cross-dressing people may seek medical assistance to transition and live permanently in their preferred gender at some point in their life. Others are happy to continue cross-dressing part-time for the rest of their lives.

Definitions are taken from UNDP (2017) *Advancing the Human Rights and Inclusion of LGBTI People: A Handbook for Parliamentarians*; and UNDP (2018) *LGBTI People and Employment: Discrimination Based on Sexual Orientation, Gender Identity and Expression, and Sex Characteristics in China, the Philippines and Thailand*

Practices

It is important to keep up-to-date with new practices and behaviours amongst young people and YKP specifically, as they may inform programming and policy responses. This is not an exhaustive list of practices, and any agency funding or implementing programmes for YKP

should work with them to understand new and context-specific practices that may be relevant for interventions. It is important that programmers do not take a moralistic stance in relation to these practices but, rather, understand them and address the health and rights of YKP as the primary goal of programming.

TABLE 7: YKP PRACTICES

Practice	Explanation
Chemsex, high fun, party and play	Chemsex is the consumption of drugs to facilitate sexual activity. Some studies have found that people participating in chemsex parties have a higher probability of acquiring sexually transmitted diseases by having unprotected anal sex with large numbers of sexual partners. ¹² People who use cocaine and amphetamine-type stimulant drugs are also at increased risk of HIV, including in the context of "chemsex" (the collective use of recreational drugs to enhance sexual experience). ¹³

¹² McCall, Hannah; Adams, Naomi; Mason, David; Willis, Jamie (2015-11-03). "What is chemsex and why does it matter?". *BMJ*. 351: h5790. doi:10.1136/bmj.h5790. ISSN 1756-1833.

¹³ UNAIDS (2016) *On the Fast-Track to End AIDS*

Practice	Explanation
Inconsistent condom use	There are many reasons why (young) people choose to use - or not - condoms during sexual encounters. The reasons are often complex. Rather than condemning young people for not using condoms consistently, programmers should understand their logic and equip them with the skills they need to make fully-informed, autonomous decisions about their health and sexual relationships.
Drug use amongst young people who engage in selling sex	Sometimes young people who sell sex are encouraged or forced into drug use.
Barebacking	Barebacking is anal-intercourse without the use of a condom.
Group Sex	Physical sexual activity involving three or more people.
Online socializing and dating	<p>During a brainstorming meeting with UN partners, young people identified the online platforms used most often for socializing. It is important to know these in order to connect with young people generally and YKP specifically.</p> <ul style="list-style-type: none"> • Most common: Facebook, Facebook Messenger, Grindr, Instagram, Line, Tinder, Twitter, WhatsApp • Somewhat common: Blued, GROWLr, Hornet, Jack'd, ROMEO (PlanetRomeo), Snapchat, Tumblr, WeChat, YouTube • Less common: Badoo, BeeTalk, Blackberry messenger, daugau.net (gay men), myladyboydate.com, Omegle, SCRUFF (gay men), SPICY (lesbians), TransSingle¹⁴
Offline socializing and dating	<p>During the same brainstorming meeting, young people also identified the offline platforms used for cruising and meeting others:</p> <ul style="list-style-type: none"> • Most common: Campuses, Cinemas, Gay clubs and bars, Gyms, Offices, Restaurants and pubs, Saunas, Schools, Shopping malls, Toilets • Less common: Abandoned places, Cafes, Dark places, Hotels, Massage places, Parks and forests, Public transport and bus stops/stations, swimming pools¹⁵

14 UNICEF, UNESCO, UNFPA, UNAIDS, Youth Voices Count, Youth LEAD and Y-PEER, [Understanding the Formation of Gender Identities, Socialization and HIV Vulnerabilities of Adolescents: A brainstorming workshop in Asia-Pacific](#) (26 - 27 March 2018)

15 UNICEF, UNESCO, UNFPA, UNAIDS, Youth Voices Count, Youth LEAD and Y-PEER, [Understanding the Formation of Gender Identities, Socialization and HIV Vulnerabilities of Adolescents: A brainstorming workshop in Asia-Pacific](#) (26 - 27 March 2018)

Resources

- [UNDP \(2017\) *Advancing the Human Rights and Inclusion of LGBTI People: A Handbook for Parliamentarians*](#)
- [UNDP \(2018\) *LGBTI People and Employment: Discrimination Based on Sexual Orientation, Gender Identity and Expression, and Sex Characteristics in China, the Philippines and Thailand*](#)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Do we know the appropriate terminology to use when working with and for YKP?
- Do we know which terms YKP prefer to use when referring to themselves?
- Does the language we use exclude anyone or any groups? If so, how can we change that?
- Do we know YKP's practices?

- Do we make judgments about certain practices or behaviours? If so, how does that affect how we speak about or work with YKP?
- Do we use language in our programmes that excludes certain groups? (E.g. using English in a context where the majority of people do not speak it fluently.)

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

- Partner with a YKP-led organisation or network to conduct a language 'audit' of your agency's publications and web presence. Where possible, edit your agency's language to fit the preferred terms and definitions of YKP in your context.
- Develop a language guide, including a list of YKP-related terms and definitions, for your agency. Ask a YKP-led organisation or network to proofread it for you before finalization.
- Hold a discussion with a YKP-led organisation or network to understand new practices and the 'slang' used to refer to them in your context.

FOUNDATION

3



UNDERSTAND THE REALITIES OF YKP

Share and learn

In any given context, statistics and facts help to identify trends. If relied on too heavily, however, they may reduce people to one aspect of their identity or one practice in which they engage. If all we know about a person is that they identify as trans* or is living with HIV, for example, we miss out on so much. When complemented by stories, statistics can help us to empathize with individuals' realities. Facts may give us clues but lived realities are the starting point for programming in a way that makes a real impact on YKPs' lives.

Understanding anyone's lived experiences requires an understanding of all the different 'layers' of life that affects every human being. In other words, it requires knowledge of who they are as an individual (likes, dislikes, experiences, temperament, resilience, vulnerability); familial, peer and social relationships; the institutions with which the person comes into contact with (e.g. educational, health and legal institutions);

the media to which the person is exposed; and the societal level factors that shape their lives, to name a few. The socio-ecological model is often used to visually represent all of the overlapping, concentric layers of factors that affect us all and have an impact upon our health and well-being.



YKP who were consulted in the development of these Guidelines identified several important factors that shape their everyday lives. They cut across the different layers of the socio-ecological model and impact how they interact with each other, authorities, family members, peers, health systems and government. Not all people who identify as YKP may experience all of these factors, and they may experience them to greater or lesser degrees depending upon their context and identities.

‘There is no YKP representative in decision making and no policy is developed for our rights. Donor agencies talk about the young population but till date, there is no specific program for young people in county-level; implementing agencies try to give some basic programs to YKPs but they also don’t have specific programs so they know our ground realities but can’t help us fully.’

Regional survey respondent (Nepal)

Intersectionality and identity

Intersectionality as a principle requires an understanding of the ways in which the multiple, overlapping identities of individuals may compound the disadvantages that they face. In other words, a person who uses drugs may also identify with other population groups, such as those characterized by religion, race, or culture, that make them vulnerable. Similarly, a person who uses drugs may also identify as

a sex worker and may be living with HIV, all of which have to be taken into consideration when contemplating their needs and realities. The interconnected nature of social categorisations like race, gender, profession or sexual behaviour, or class creates overlapping and interdependent systems of discrimination or disadvantage. These overlapping identities and experiences of an individual or group must be taken into account when addressing rights violations.

It is also important to understand that ‘western’ definitions of sexual identity imported by donors and programmers may, in some cases, have little to no relevance in certain contexts in the Asia Pacific. Often, the term ‘LGBTQ’ is used to describe a vast array of different identities and practices, even though it may simplify the lived experiences of young people. Often, young people who do not identify themselves as ‘lesbian,’ ‘gay,’ ‘bisexual,’ ‘transgender’ or ‘queer’ in everyday life are forced to ascribe to these labels and identities so that they can be understood in their interactions with community-led organisations and government systems. When sexual or gender identity labels are used as primary markers of identity, some young people, including YKP, can feel excluded from the conversation or the program. In extreme cases, being forced to identify as a member of one group or another in order to benefit from a programme can result in further harm to a young person.

‘If the organization [doesn’t] understand the needs of the key population, they won’t help.’

Young Transgender (Bali, Indonesia)

TABLE 8: FACTS AND STATS



84,000 new HIV infections

among 15-24-year-olds in Asia-Pacific in 2017, which represents 30% of all new infections in the region.¹⁷

450,000 young people

living with HIV in Asia Pacific in 2017, which represents 9% of all people living with HIV in the region.¹⁸

Papua New Guinea

has the highest reported HIV prevalence (12.7%) amongst sex workers under 25 years old among countries where data are available, and China the lowest prevalence (11%).¹⁹

95% of new infections

in young people in Asia are in 'most at risk' adolescents, whilst 90% of the resources are allocated to 'low risk' adolescents.²⁰

<25 years old

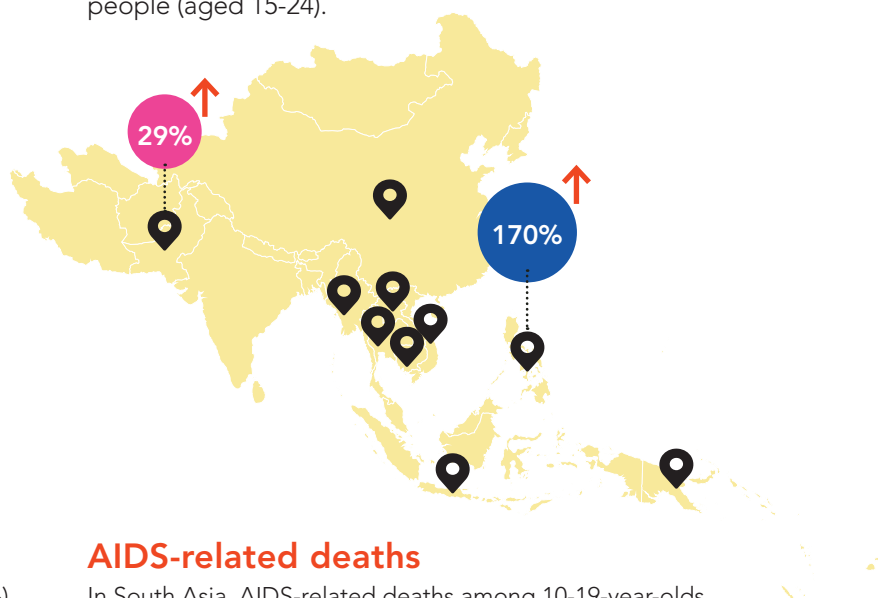
HIV prevalence among people who inject drugs aged under 25 is much higher, proportionately than among the same age cohort of sex workers and MSM in a majority of countries where such data are available.²¹

10 countries

The HIV burden among adolescents falls heaviest on 10 countries, namely **India, Indonesia, Thailand, Myanmar, Viet Nam, China, Cambodia, the Philippines, Papua New Guinea and Pakistan**, which together account for 98 per cent of adolescents (aged 10-19) living with HIV in the region.¹⁶

Increasing HIV risk

among young people within key populations is of particular concern: since 2010, new infections increased by **170% in the Philippines** and **29% in Pakistan** among young people (aged 15-24).



AIDS-related deaths

In South Asia, AIDS-related deaths among 10-19-year-olds have almost quadrupled, from around 1,500 in 2001 to 5,300 in 2014. In East Asia and the Pacific, deaths among this age cohort increased from 1,000 to 1,300 over the same period.²²

Bangkok cohort study

of 4,762 young MSM (2006-2011), the probability of those aged **18-21 acquiring HIV over a five-year period was over 30 per cent**, the highest among all age groups.²³

An Indonesian survey (2007-2009)

showed HIV prevalence to be 5.4 per cent among 15-19-year-old transgender adolescents selling sex and 14.2 per cent among their 20-24-year-old counterparts. In Pakistan, 10 per cent of 15-19-year-old hijras selling sex were found to have HIV (2008), compared with 7.5 per cent of their 20-24-year-old peers.²⁴

16 UNICEF East Asia and Pacific Regional Office (2015) *Adolescents Under the Radar in the Asia-Pacific AIDS response*, p 14

17 HIV and AIDS Data Hub for Asia Pacific. Available at: <https://www.aidsdatahub.org/young-people-slides-2018>

18 HIV and AIDS Data Hub for Asia Pacific. Available at: <https://www.aidsdatahub.org/young-people-slides-2018>

19 UNICEF East Asia and Pacific Regional Office (2015) *Adolescents Under the Radar in the Asia-Pacific AIDS response*, p 21

20 Commission on AIDS in Asia (2008) *Redefining AIDS in Asia: Crafting an Effective Response*, p 146

21 UNICEF East Asia and Pacific Regional Office (2015) *Adolescents Under the Radar in the Asia-Pacific AIDS response*, p 22

22 UNICEF East Asia and Pacific Regional Office (2015) *Adolescents Under the Radar in the Asia-Pacific AIDS response*, p 14

23 UNICEF East Asia and Pacific Regional Office (2015) *Adolescents Under the Radar in the Asia-Pacific AIDS response*, p 17

24 UNICEF East Asia and Pacific Regional Office (2015) *Adolescents Under the Radar in the Asia-Pacific AIDS response*, p 24

‘Youth LEAD brings all YKP together to discuss and advocate for common and individual issues. The approach utilized is not one of segregation based upon status or identity, unless it is necessary in order to highlight unique needs. We ensure equal representation from all YKP groups, including within the board, regional secretariat and country focal points. Country partners follow a similar pattern.’

Bringing all the YKP together has forged solidarity in advocacy; now, for example, a young drug user representative is able to empathize, support and articulate the issue of young MSM. It has paved the way to better understanding each others’ issues. Importantly, it has provided an enabling environment for the YKP with multiple identities. They can freely discuss all the issues that pertain to them and find solutions, experience and tools from the members.’

**Gaj Gurung, Executive Coordinator,
Youth LEAD**

Examples of rights violations

- YKP are forced to ‘label’ themselves or identify themselves with one group or another in order to access services through programmes.
- Programmes fail to recognize the overlapping identities of many young people, thus neglecting certain areas of their health and rights.

Coercion

For many young people who identify with one or more YKP groups, coercion is a part of life. It comes from many different sources, including laws and policies, health and education professionals, families, sexual partners and law enforcement

officials. It also comes in many different forms, including physical or verbal abuse, legal requirements for adult involvement in decision-making, denial of legal or police protection, exploitation by public officials and lack of choice with regard to condom use. In general, there’s a sense amongst YKP that they are not free to make decisions about their own lives and their bodies. Every effort should be made to ensure that programmes designed with and for YKP mitigate this reality.

Examples of rights violations

- A young man who has sex with men is forced to get the consent of one or more legal guardian before he can access STI or HIV testing, thus coercing him into disclosing (implicitly or explicitly) details of his private sexual life to his parents.
- A young woman who engages in selling sex and has a pimp is coerced into having sex without a condom with clients, as her boss wants the extra money that clients pay to have sex without a condom.
- A young trans* woman is arrested by the police and is offered release upon the condition that she performs oral sex for several officers.

Age

The word ‘young’ in ‘young key populations’ is key to understanding the challenges that they face. Age is, more often than not, a factor that compounds all other challenges. For one, young people are often considered to be ‘sexually innocent.’ Non-conformity with this norm can mean social and familial exclusion for young people. Another age-related challenge is that services aimed at supporting key populations are often primarily for adults; in some places, people under a certain age are legally prohibited from accessing services, such as HIV testing, drug treatment, clean needles, and gender-affirming surgeries. In general, young people across the world are seen as ‘less than an adult,’ meaning that they are expected to defer to the opinions of those who are older. They are seen as being in need of ‘protection,’ and thus are denied information needed to make autonomous, informed decisions about their own lives and

bodies. A third age-related concern is the diversity of needs; levels of development; and evolving capacities within the 15-24 year age group. 15-19-year-olds would typically have very different needs and capacities from 20-24-year-olds. The concept of 'evolving capacities' is explained in the box below.

'Evolving capacity of the child' is embedded in the Convention on the Rights of the Child (CRC), in particular articles 5 and 12. Evolving capacity is about individual development and autonomy and refers to the way that each young person gradually develops the ability to take full responsibility for their own actions and decisions. This happens at a different pace for each individual. At any given age, some young people will be more mature and experienced than others; context and personal circumstances will almost certainly influence each individual's development.²⁵ Adolescents and young people have varied lives and live in diverse circumstances, with age being just one of the factors. As explained in other sub-headings of this other Foundation, there are other factors that affect young people, including family and community, education, gender, religion and culture, among others. In order to assess the capacity of a particular young person to make informed decisions about their own bodies and lives, a service provider must look at the composite effect of these factors.²⁶

'Very few rights are respected. [The] young population [is] not considered able to make wise and effective decisions in my community and country as a whole. Young groups are led by aged people who seldom remember their days as young people and make decisions accordingly.'

Regional survey respondent (Nepal)

Examples of rights violations

- Young people are expected to be sexually innocent, so are punished if they express their sexuality in any way in the presence of adults.
- Programmes aimed at YPUD require participants to be 18 years of age before accessing clean needle exchanges, or other harm reduction services.
- Laws and policies require young people under a certain age to have their parents' consent before accessing SRH services, including HIV testing.

Poverty

Poverty goes hand-in-hand with age as a factor that magnifies many of the challenges faced by YKP in Asia-Pacific. As a general rule, young people have less money than adults and are often dependent upon parents or other adults for financial support. Losing the support of these people can mean homelessness or financial troubles that affect decisions that they make about their bodies and health.

Examples of rights violations

- Young people engaged in selling sex who are arrested are less likely to be able to afford the fines required for release than their adult counterparts.
- Pre-exposure prophylaxis (PrEP) - a preventive measure against HIV - is too expensive for many YKP who may benefit greatly from its use.

Education

In general, young people are not supposed to be 'in the know' about sex and drugs. As a result, they are often denied the opportunity to learn about how to protect themselves. Comprehensive sexuality education (CSE) is not provided for many young people in the Asia Pacific region and, where it is available, educators may gloss over parts of the curriculum about

²⁵ IPPF (2011) *Keys to youth-friendly services: Understanding evolving capacity*

²⁶ Watson, K & Singh, A (2011) *Ready to Decide? Evolving Capacities, Young Women and Sexual and Reproductive Health*, In Olyai, R & Dutta, D K (Eds.), *Recent Advances in Adolescent Health*, pgs. 269-273, JP Medical Ltd.

which they feel uncomfortable, and information specific to the realities of YKP is omitted. For example, examples are given in class often use boyfriend-girlfriend scenarios, which do not reflect the realities of all young people. Without access to scientifically accurate, evidence-based education, young people turn to less reliable sources for their information that may fuel myths and misinformation.

Examples of rights violations

- Sexuality education in many countries remains focused primarily on the prevention of illness, rather than on the skills needed to make informed decisions about health and well-being.
- Information about gender inequality and diversity is omitted from many sexuality education curricula, making it difficult to overcome persistent gender stereotypes and biases within society at large.

Discrimination and violence

Young people who identify with one or more key population often face discrimination in their everyday lives and many also live with constant threats of violence. Discrimination comes in the form of government laws, policies and practices, as well as interactions with those around them on a daily basis. The impunity with which people perpetuate discrimination and violence against YKP means that they often have a distrust in authorities whose role it is to protect them. This distrust, in turn, may mean that YKP do not feel comfortable seeking the support or services they need to maintain their health and well-being. This is an important point to consider when designing programmes.

Examples of rights violations

- YKP are bullied at schools where there is little or no support from the administrators which, in turn, can lead to them leaving school.
- Police may harass sex workers on the streets, even when they are not violating any laws,

which makes it more difficult for sex workers to seek help if they have been abused by a client.

- YKP may have to face homelessness and/or mental ill-health if their families discriminate against their sexuality or behaviour and withdraw support from them.

'In Asia Pacific, YKP is still faced with stigma and discrimination. They have a lot of difficulties when they secure a job or try to assimilate with society. My friend once told me that when he tried to apply for a job as a coach at a gym, the manager was very welcome at first. However, after a few days, the manager suddenly fired him. My friend was so confused because things seemed very good. Finally, one of the staff at the gym told him that a customer reported to the manager that he is gay. My friend is quite angry, but there is nothing he can do.'

Regional survey respondent (Vietnam)

'Police still arrest us without any reason, at night time, under the law 30D (that police can inspect the person who stays in the shadow when night), even [if] we have not made any mistake. Then they release us after cut[ting] our long hair.'

A young person who identifies as transgender and as a sex worker (Myanmar)

Resources

- Association of People Living with HIV Pakistan (2015) *Rapid Assessment of Needs of YPLHIV and YKP In Pakistan*
- Ministry of Health Philippines & UNICEF (2015) *The Growing HIV Epidemic among Adolescents in the Philippines*
- Ministry of Health Indonesia & UNICEF (2018) *HIV among Adolescent and Young Key Populations (Aged 15-19 and 20-24) in Indonesia*
- IPPF (2011) *Keys to youth-friendly services: Understanding evolving capacity*

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Have we done a needs assessment to better understand YKP's realities? If so, was it done in partnership with YKP themselves?
- Do we have the most relevant, up-to-date statistics to help us make programming decisions? If statistics don't exist, what are we using to understand YKP's lives?
- Are we committed to listening to YKP on an ongoing basis to understand the challenges they face? If so, how do we do that in our programmes?
- Do our programmes reduce YKP to one identity trait? If so, how can we ensure that we're taking account of their multiple,

overlapping identities in our programmes?

- Are we aware of the ways in which young people in general face discrimination in our context? What does it mean to be both a young person and identify as a member of one or more key populations in our context?
- How does poverty exacerbate (make worse) the difficulties that young people face? What do young key populations face? How can our programmes address this?
- Do our programmes assume that most young people are in school? What percentage of YKP are out of school in our context? How are we trying to reach them?
- Do we work with groups who impact upon YKP's health, rights and wellbeing? (e.g. police officers, teachers, health professionals) If not, why not? If so, are we listening to YKP's concerns about these groups?

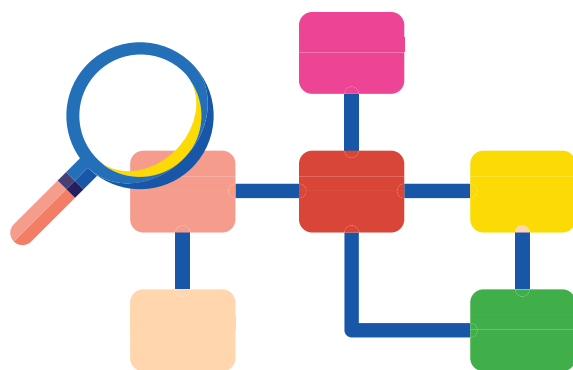
Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

- Partner with a YKP-led organisation or network to conduct needs assessments and/or focus group discussions with YKP to better understand their realities
- Collect any and all data on YKP, HIV and SRH and create a fact sheet that can be used by programme staff as a quick reference
- Advocate for and invest in collecting disaggregated data on YKP by age, sex, behaviour, etc. to ensure better / evidence-based policymaking and programme planning

FOUNDATION

4



REVIEW THE HUMAN RIGHTS FRAMEWORK

Share and learn

All young people in the Asia Pacific are rights-holders. This means that they are entitled to the protections and freedoms afforded in international, regional and national laws. Laws are a powerful force in any context; this force is both 'practical' and 'normative.' It is practical in the sense that the law can physically prevent or enable a young person to access health services. It also has normative power in its ability to reinforce discrimination and stigma; create fear and uncertainty; and/or grant impunity to people or institutions that violate young people's rights. It is, therefore, very important to have a firm grasp on the 'letter of the law' as well as how it is wielded by different actors to the benefit or detriment of young people generally and YKP specifically.

International

Most countries in the Asia Pacific have signed and ratified international agreements that protect the human rights of all young people. Governments have the obligation to respect, protect and fulfil the

human rights covered under these agreements. A few of the primary international human rights agreements with which YKP programmers should be familiar are:

- **Convention on the Rights of the Child (CRC)** protects the rights of people under the age of 18, including their rights to health, education, participation and freedom from violence, amongst many others. Importantly, the CRC recognizes that young people's capacities to make decisions evolve over time.
- **International Covenant on Economic, Social and Cultural Rights (ICESCR)** specifically prohibits discrimination based on race, colour, sex, language, religion, political or other opinions, national or social origin, property, birth or other status (Article 26). In 1994, the United Nations Human Rights Committee ruled that "sex" as used in the ICCPR also includes sexual orientation, and held that States are obligated to protect individuals from discrimination on the basis of their sexual orientation.²⁷ In addition, the [CESCR General Comment 14 on the Right to the Highest Attainable Standard of Health](#) specifies that

27 UNFPA EECA et al (2018) *Health, Rights and Well-being: A Practical Tool for HIV and SRH Programmes with YKPs in EECA*

this right includes sexual and reproductive freedom; and the [CESCR General Comment 22 on the Right to Sexual and Reproductive Health](#) elaborates that some population groups experience multiple and intersecting forms of discrimination that exacerbate their exclusion in both law and practice, such as lesbian, gay, bisexual, transgender and intersex persons and persons with disabilities.

- **Convention on the Elimination of Discrimination against Women (CEDAW)** recognizes the equality of women in all areas of life.
- United Nations Human Rights Council Resolution ‘**Protection against violence and discrimination based on sexual orientation, and gender identity**’ (2016) appointed an independent expert on the subject to be tasked with ‘assessing the implementation of existing international human rights law, identifying best practices and gaps, raising awareness of violence and discrimination based on sexual orientation and gender identity, engaging in dialogue and consultation with states and other stakeholders, and facilitating the provision of advisory services, technical assistance, capacity-building, and

cooperation to help address violence and discrimination on these grounds.’²⁸

- **2016 Political Declaration on HIV and AIDS** lays out the commitments that states have for adolescents and young people in the HIV response with provisions like 61 (c) “*eliminate gender inequalities and gender-based violence, increase the capacity of women and adolescent girls to protect themselves from the risk of HIV infection*” and 64 (b) “*encouraging and supporting the active involvement and leadership of young people, particularly women, including those living with HIV, in the fight against the epidemic at the local, national, subregional, regional and global levels*”.
- **Yogyakarta Principles** and the **Yogyakarta Principles plus 10** provide the basis for the application of International Human Rights Law in relation to SOGI. It looks into certain rights that are important for young people of diverse sexualities, such as the right to the highest sustainable standard of health. In the Plus 10, the right to freedom from criminalisation and sanction on the basis of SOGIESC was also provided.

TABLE 9: CONVENTION ON THE RIGHTS OF THE CHILD, GENERAL COMMENT 20

Para 39	Consideration should also be given to the introduction of a legal presumption that adolescents are competent to seek and have access to preventive or time-sensitive sexual and reproductive health commodities and services.
Para 40	States parties should take into account the need to balance protection and evolving capacities, and define an acceptable minimum age when determining the legal age for sexual consent. States should avoid criminalizing adolescents of similar ages for factually consensual and non-exploitative sexual activity.
Para 60	There should be no barriers to commodities, information and counselling on sexual and reproductive health and rights, such as requirements for third-party consent or authorization. In addition, particular efforts need to be made to overcome barriers of stigma and fear experienced by, for example, adolescent girls, girls with disabilities and lesbian, gay, bisexual, transgender and intersex adolescents, in gaining access to such services. The Committee urges States to decriminalize abortion to ensure that girls have access to safe abortion and post-abortion services, review legislation with a view to guaranteeing the best interests of pregnant adolescents and ensure that their views are always heard and respected in abortion-related decisions.

Para 61 Age-appropriate, comprehensive and inclusive sexual and reproductive health education, based on scientific evidence and human rights standards and developed with adolescents, should be part of the mandatory school curriculum and reach out-of-school adolescents. Attention should be given to gender equality, sexual diversity, sexual and reproductive health rights, responsible parenthood and sexual behaviour and violence prevention, as well as to prevent early pregnancy and sexually transmitted infections. Information should be available in alternative formats to ensure accessibility to all adolescents, especially adolescents with disabilities

Regional

This section provides details of regional agreements that address HIV, reproductive health/rights, sexual health/rights, young people

and/or key populations. The extent to which each agreement is legally binding is not provided; nevertheless, the content of the agreements contains important commitments made by governments across Asia and the Pacific.

TABLE 10: REGIONAL HUMAN RIGHTS AGREEMENTS

Agreement	Highlights
Bali Declaration on Population and Sustainable Development (1992)	<ul style="list-style-type: none"> Provides recommendations for governments to address pressing population issues in the region Includes the following sections of recommendations: 'Family planning and maternal and child health' (section C); 'Women and population' (section E); and 'Mortality and morbidity,' which includes HIV/AIDS (section G) Although old, shows the longevity of Asian and Pacific governments to sexual and reproductive health issues
Fifth Asian and Pacific Population Conference Plan of Action on Population and Poverty (2002)	<ul style="list-style-type: none"> Provides recommendations for governments to address pressing population issues in the region Includes the following sections of recommendations: 'Gender equality, equity and empowerment of women' (section E); 'Reproductive health and rights' (section F); 'Adolescent health' (section G); and 'HIV/AIDS' (Section H) Encourages partnership between government and non-governmental organisations
Social Charter of the South Asian Association for Regional Cooperation (SAARC) (2004)	<ul style="list-style-type: none"> States Parties agree to a range of human rights principles, including non-discrimination Parties to the agreement affirm commitments to health care for their populations (Article IV), HIV education (Article V) and eradication of discrimination against women (Article VI)
Pacific Policy Framework for Achieving Universal Access to Reproductive Health Services and Commodities (2008-2015)	<ul style="list-style-type: none"> Signed by fourteen Pacific Island Countries (PICs) Agreement to integrate reproductive health, including family planning, maternal health, STIs and HIV, into national health policies, strategies and action plans to the fullest extent possible (3.1.3b) Commit to adopting gender- and human rights-based approaches (3.1.3c)

Agreement	Highlights
Pacific Regional Strategy on HIV and Other STIs (2009-2013)	<ul style="list-style-type: none"> • Sets out a coordinated strategy for addressing HIV in the Pacific region • Includes a key action area on outreach to key populations, including sex workers and MSM • Articulates a strategy for involving those living with HIV
Association of Southeast Asian Nations (ASEAN) Declaration of Commitment on HIV (2011 and 2016)	<ul style="list-style-type: none"> • Spells out commitments made by Asian nations toward zero new HIV infections, zero discrimination and zero HIV-related deaths • Reaffirming the commitments made in 2011, ASEAN Declaration of Commitment on HIV and AIDS: Fast-Tracking and Sustaining HIV and AIDS Responses To End the AIDS Epidemic by 2030
ASEAN Human Rights Declaration (2012)	<ul style="list-style-type: none"> • States that all rights are applicable to all people, regardless of status • Commits states to creating an environment free of stigma against people living with HIV (29(2))
Asian and Pacific Ministerial Declaration on Population and Development (2013)	<ul style="list-style-type: none"> • Recognizes that sexual and reproductive rights are human rights (76) • Proposes that states work to reduce discrimination based upon age, gender identity, sexual orientation and many other factors (84) • Recognizes the need for sufficient resources for sexuality education programmes that are consistent with evolving capacities and are age-appropriate, and provide accurate information on human sexuality, gender equality, human rights, relationships, and sexual and reproductive health (146)

National

The legal framework - which includes laws, policies, regulations, protocols and norms - contains a variety of restrictions that affect YKP. These relate not only to access to services but, also, regulation of sexual behaviour, education and gender identity. On the flip side, the law also provides a range of protections and freedoms. YKP and those implementing programmes with them should be fully aware of the law, including in the following areas:

Restrictions

- laws that set a minimum age requirement for consenting to medical procedures, interventions or services
- laws that require parental or guardian consent for young people under a certain age to access services
- laws that criminalize sex between young people under a certain age
- laws that criminalize same-sex sexual activity

- laws that criminalize sex workers
- laws that criminalize people who use drugs

Protections

- anti-discrimination laws that protect those with diverse gender identities and/or sexual orientations
- laws that give all young people the right to access health services, including SRH, harm reduction, and HIV services
- laws that give all young people the right to access sexuality education that is scientifically accurate

Often, laws that restrict access to services in both direct and indirect ways are at odds with the goals and objectives of national health strategies, which seek to promote the well-being of all young people. For example, a national health strategy may stipulate that young people have the right to access sexual and reproductive health services, whilst the criminal law states that sex with or between people below the age of 18 is a crime. These situations are difficult for both young

people and health professionals to navigate, as they cause confusion, uncertainty and fear. [See case study on Taiwan under 'Services' in Programming Step 4]

Resources

- Asia-Pacific Interagency Task Team on Young Key Populations et. al (2018) *Young People and the Law in Asia and the Pacific: Legal Advocacy Toolkit*
- Sexual Rights Initiative (no date), *National Sexual Rights Law and Policy Database*
- ILGA (no date), *State-Sponsored Homophobia*
- Global Network of Sex Worker Projects (no date), *Sex Work and the Law*
- Sexuality, Poverty and Law Programme (no date), *Map of Sex Work Law*
- UNESCO (2013), *Young People and the Law in Asia Pacific*
- Equaldex (no date), *LGBT Knowledge Base*
- ESCAP (2014), *Creating Enabling Legal Environments: Conducting National Reviews and MultiSectoral Consultations on Legal and Policy Barriers to HIV Services*
- UN Office of the High Commissioner on Human Rights (2012), *Born Free and Equal: Sexual Orientation and Gender Identity in International Human Rights Law*
- UNDP & USAID (2014) *Being LGBT in Asia: Thailand Country Report, Bangkok*
- Amnesty International *Human Rights Education* (free courses on human rights, including in Korean, Chinese, Urdu, Thai and Bangla)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Are we aware of the relevant international, regional and national human rights agreements and laws of relevance to YKP?
- Are YKP aware of all the ways that legal frameworks protect their rights?
- How are we working to change laws that lead to the violation of YKP's rights?
- How do the laws limit what we can do in our programmes with YKP? Are those limitations written IN LAW? Or are they based on our interpretations of the law?
- How do the laws facilitate working with and for YKP? How can we use these to our advantage?
- Are there any policies that protect everyone's rights that can be used as a starting point for legal advocacy for YKP's rights?
- Do we know how to use international and regional agreements for our advocacy? In what contexts are they useful or not useful?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

- Do a review of all laws in your national context that affect YKP, including in relation to protection against discrimination, access to health care and information and any laws that criminalize their practices
- Conduct an analysis of how strictly your country is adhering to its regional and international human rights law obligations in relation to YKP rights and publish for advocacy purposes
- Work with YKP-led organisations or networks to document rights violations they face due to discriminatory laws and policies
- Remember to highlight the specific issues of YKP's rights in other human rights fora

PROGRAMMING 1



ADOPT KEY PRINCIPLES

Share and learn

This section provides a description of the most important principles for programming identified by YKP during a June 2018 consultation workshop. Whilst the list is long, many of the principles are overlapping and mutually-reinforcing. All programmes designed for and with YKP should, at their core, work according to these principles, once the four foundations are in place.

What is a principle? A basic idea or rule that explains or controls how something happens or works.²⁹

Human rights compliant

Human rights are indivisible and, as such, any programme designed to advance one set of rights (e.g. sexual and reproductive rights (SRR)) must also consider the ways in which other human rights can and should be advanced. For example, programmes designed to advance the SRR of YKP should also advance their rights to participation, freedom from violence and discrimination, accountability and redress, and freedom of expression and thought, amongst others. Sexual and reproductive rights are human rights set out in international agreements that have been signed and ratified by governments around the world. Below is a set of sexual rights, defined by IPPF, which are based on these international agreements. Programmes for YKP should attempt to address 'root causes' of human rights violations, rather than merely addressing the 'symptoms' of them.

²⁹ Cambridge Dictionary definition available at: <https://dictionary.cambridge.org/dictionary/english/principle>

TABLE 11: IPPF DECLARATION ON SEXUAL RIGHTS: EXCLAIM!

1. The right to equality	All human beings are born free and equal in dignity and rights. Therefore, all young people should be able to exercise and fulfil their rights equally, including sexual rights. No young person should be discriminated against on the basis of sexuality, sex, gender, gender identity, sexual orientation, age, religion, race, ethnicity, nationality, HIV status, marital status, physical or mental disability, socio-economic status, or any other status.
2. The right to participation	Everyone has the right to actively and freely participate in all aspects of human life. All young people are political beings. This means that all young people, including those under the age of majority, married and unmarried young people, young people living with HIV, young people living with disabilities, young migrants and young people of all sexual orientations and gender identities have the right to meaningfully participate in decision-making that affects their lives.
3. The right to life and to be free from harm	Everyone has the right to life, liberty and to be free from harm. This includes the right to express one's sexuality and gender free from coercion or violence. No one can be harassed, harmed, punished or killed because of their sexual practices, gender identity or expression, nor as a way to protect the reputation or honour of a family or community. Young unmarried women, YPLHIV, young lesbians, gay, bisexual, intersex and trans* young people must be especially protected from harm and punishment.
4. The right to privacy	All young people have the right to privacy and to make autonomous decisions about their sexuality privately. All young people also have the right to decide if, when, how and with whom to share information about their sexual choices without forceful interference from other people.
5. The right to personal autonomy and to be recognized as an individual before the law	All young people have the right to decide freely on all matters related to their sexuality and to fully experience their sexuality and gender in a pleasurable way. Everyone has the right to do so while being recognized as an individual before the law.
6. The right to think and express oneself freely	All young people have the right to express their thoughts, opinions, needs and desires related to sexuality without limitations based on dominant cultural beliefs or political ideologies. All young people have the right to explore their sexualities and should be able to have dreams and fantasies, and voluntarily express their sexuality without fear, shame or guilt while respecting other people's rights.
7. The right to health	Every young person has the right to enjoy the highest attainable standard of physical and mental health and wellbeing, including sexual and reproductive health and the underlying factors that contribute to health. Young people also have the right to be protected from social, environmental and economic factors that lead to poor health status.

8. The right to know and learn	<p>All young people have the right to education and information, including comprehensive, gender-sensitive and rights-based sexuality education. All young people have the right to access accurate, easy to understand information and education about sexuality, sexual health, reproductive health, sexual rights and reproductive rights in order to make decisions freely and with informed consent.</p>
9. The right to choose whether or not to marry or have children	<p>Every young person has the right to choose when, if, how and whom to marry and have children in an environment that recognizes diverse family types.</p>
10. The right to have your rights upheld	<p>Governments must respect, protect and fulfil all sexual rights for young people.</p> <ul style="list-style-type: none"> • Respect means not interfering directly or indirectly with young people's enjoyment of their rights. • Protect means taking measures to prevent others from interfering with young people's human rights. • Fulfil means adopting laws, policies and programmes that enable young people to fully realize their sexual rights.

Gender transformative

Gender transformative programming requires an analysis of how any given programme and its components are seeking to 'disrupt' - or overturn - harmful gender norms, stereotypes and biases. Rather than reproducing harmful gender norms, programmes should promote critical thinking and reflection amongst all stakeholders. The use of inclusive language is one important way that programmes can disrupt norms through, for example, the use of appropriate pronouns and the 'lingo' preferred by YKP themselves.

Age transformative

Programmes can be 'age transformative' by promoting critical reflection amongst stakeholders - particularly adults - about what young people 'should' and 'should not' do (norms). In doing so, programmes can highlight the detrimental effects that these norms have on young people. For example, highlighting the norm that young

people are expected to be 'sexually innocent' can lead to a discussion about how this deters young people from seeking information and services from adults that could protect them from unwanted pregnancy, gender-based violence and sexually transmitted infections.

Sex positive

Young people are sexual beings with sexual rights. As per an IPPF publication on youth friendly services, sex positivity is: 'an attitude that celebrates sexuality as an enhancing part of life that brings happiness, energy and celebration. Sex-positive approaches strive to achieve ideal experiences, rather than solely working to prevent negative experiences. At the same time, sex-positive approaches acknowledge and tackle the various concerns and risks associated with sexuality without reinforcing fear, shame or taboo of young people's sexuality and gender inequality.'³⁰

30 IPPF (2011) *Keys to youth friendly services: Adopting a sex positive approach*

Evidence-based

Quite often, programmes for YKP and other young people use morality or personal beliefs, rather than scientific evidence, as a starting point. For example, YKP may be denied contraception because adults hold the belief that they should not be having sex; however, scientifically, all forms of modern contraception are safe for young people to use.

User-friendly

Where services and information of any kind are being provided to YKP, they should be friendly and directly address their needs. This requires staff members - from receptionists, cleaners and suppliers to doctors, outreach workers and nurses - to be trained in the needs and realities of YKP, including being non-judgemental and respectful of privacy and confidentiality.

Systems- focused

As with human rights compliance and gender transformation, programmes for YKP should seek to overturn systems of oppression, rather than merely change practices that harm them. This 'systems' approach means looking beyond the violations perpetrated by individuals to look at the systems that enable and encourage them. A systems approach does not mean that individual-level interventions (e.g. trainings for providers) are not required; rather, they should be seen as one amongst many interventions needed to change the way that health, education, and legal systems - amongst others - address the rights of YKP.

Participatory

Young people who identify with one or more key populations know best what their needs and realities are; this alone should suffice as a reason to include them in all aspects of any programme designed for their benefit. They have the right to participate in decisions that affect them and their health, as well as to be mentored and take leadership roles.

Decision-makers are almost clueless [about] YKP. Leaders now are just sitting in an office and waiting for people to bring papers and then sign them, but few actually work with heart and mind.'

A young person living with HIV
(Vietnam)

Transparent

Young people deserve to know the inner workings of programmes that seek to serve them; this means that YKP need to be part of all decision-making bodies within a programme. Transparency includes financial transparency; YKP should have a say in how money is spent and be able to view the accounts related to a programme. In addition, YKP must be enabled to understand donor agendas and how these do/do not relate to their own realities and local contexts and be able to question these agendas where required.

Inclusive

YKP who identified this principle called it the 'leave no one behind' principle. Often programmes will reach the 'easy to reach' young people with their interventions. For example, rather than developing strategies to reach YKP in far-flung areas, programmes may choose to focus on urban centres. YKP consulted for these Guidelines feel strongly that programmes seek out those who are most marginalized and invisibilized by society.

YKP-specific

As mentioned previously, many programmes designed for key populations are for adults. If young people access such programmes, it is only by coincidence as they are not targeted specifically. Programmes designed for adults do not address the specific realities of YKP's lives, including the compounded stigma they face being young.

Confidential

All programmes designed for YKP should ensure their privacy and keep all details of their lives and health confidential. Not only is privacy the right of all people, but it is of utmost importance in protecting YKP's safety.

Resources

- IPPF (2011) *EXCLAIM! Young people's guide to 'Sexual rights: an IPPF declaration'*
- IPPF (2016) *Fulfil! Guidance document for the implementation of young people's sexual rights*
- Rutgers (2018) *Adopting a gender transformative approach in sexual and reproductive health and rights, and gender-based violence programmes*
- UNAIDS (2014) *UNAIDS Gender Assessment Tool: Towards a gender-transformative HIV response*
- International HIV/AIDS Alliance (2018) *Good Practice Guide: Gender-transformative HIV Programming*
- IPPF (2012) *What is childhood and what do we mean by 'young person'?*
- IPPF (2012) *Young people's autonomous decision-making capacities*
- IPPF (2012) *Are protection and autonomy opposing concepts?*
- IPPF (2011) *Keys to youth friendly services: Adopting a sex positive approach*
- IPPF (2016) *Putting Sexuality back into Comprehensive Sexuality Education: making the case for a rights-based, sex-positive approach*
- IPPF (2016) *Putting Sexuality back into Comprehensive Sexuality Education: tips for delivering sex-positive workshops for young people*
- International HIV/AIDS Alliance (2017) *Good Practice Guide: Adolescent HIV Programming*
- Global Fund et al (2014) *Making money work for young people: a participation tool for the Global Fund to Fight AIDS, Tuberculosis and Malaria*
- IPPF (2012) *Keys to youth friendly services: Ensuring confidentiality*

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

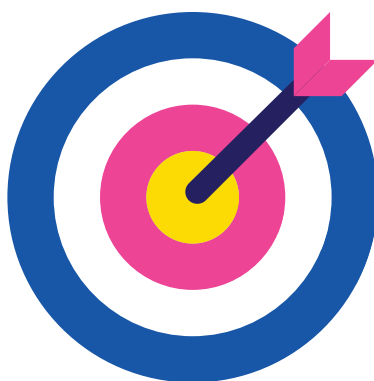
- Why are key principles important for a programme?
- Have we adopted key principles for the programme? If so, are they written down somewhere for all to see and read?
- What other key principles would be appropriate in our context, in addition to those included in these Guidelines? Are there any that don't apply? And, why?
- Have all of our staff members and volunteers been trained on key principles?
- Have we consulted with YKP to hear from them what they consider to be key principles for our programmes?
- How can we reflect these principles in our work as an organisation, rather than just YKP-specific programming?
- What are some concrete examples of how these principles can be found in our programmes? For example, how is our programme evidence-based?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region. See case studies below or in the other sections for examples of how YKP are living out their principles in action.

PROGRAMMING

2



DEVELOP GOALS AND OBJECTIVES

Share and learn

Once the foundations are in place and programming principles have been understood and adopted, it is finally time to begin the programme cycle. The first step in this would be to develop the goals of the programme, i.e. what does the programme ultimately intend to establish for YKP? Programmes for young people are often moralistic and need to switch from 'changing identities and behaviour' to an approach that focuses on human rights. The focus should be on minimizing harms, rather than punishing YKP, whilst also accepting and

celebrating the natural process that all young people undertake of exploring sexuality and relationships. Some examples of behaviour- or identity-focused versus rights-focused goals are included in the table below.

Examine and re-examine your goals for a programme and partner with the YKP group you want to reach to define these goals around developing YKP capacities and viewing them as a whole person rather than minimising their identity or life experience to being a young person who sells sex, a young MSM, a young person who uses drugs, a young trans* person, or a young person living with HIV.

TABLE 12: EXAMPLES OF PROGRAMME GOALS

Programme for	Behaviour- or identity-focused goal	Rights-focused goal	Existing programme guidance
Young people who engage in selling sex	No young people under 25 engaged in sex work in x region	All young people engaged in selling sex in x region have access to SRH services that meet their needs	<i>'Young people in sex work (not only those under 18) should be screened for the extent they control their own lives, including the decision to enter the sex trade, their say in the selection of their customers, the type of services that they provide and the income they generate.'</i> ³¹ This means that the ultimate goal of a programme should be to ensure that those young people you are working with have the information, skills and services they need to take charge of their lives. As a result, if they would like to get out of sex work, then the programme should enable their transition, and if they want to continue with sex work but be better equipped to manage unwanted pregnancies, reduce the likelihood of STIs including HIV, and not be exploited, then the programme should enable that.
Young men who have sex with men	No young men are having sex with other young men in x country/region OR Young men who have sex with men reduce the number of sexual partners	Young men who have sex with men experience a reduction in stigma, discrimination and violence in x region	Programmes should aim towards, 'improving knowledge of rights and support available to young MSM if bullied or abused while being accepting of their personal choice in terms of his sexual orientation; imparting information about the risks of HIV and STIs and building skills in negotiating safer sex; enhancing skills in negotiating and communicating about safer sex with (potential) romantic partners, and instilling a positive attitude towards and a regular habit of testing for both HIV and other STIs.' ³² Thus, similar to the goals for working with young people who sell sex, programme goals for working with young MSM need to be on the development of their capacities to address their own rights, realities and health needs, and on the provision of services that recognise and fulfil their rights.
Young people who use drugs	End to all drug use amongst young people	Reduce the harms associated with drug use amongst young people	According to consultations with young people who use drugs, one of the barriers in engaging YPUD in services is 'the perception that programmes aim to prevent drug use rather than providing harm-reduction services to young people.' ³³ Again, the idea is to step away from a moralistic approach to YKP behaviours and focus on reducing harms, ensuring rights, and building capacity and agency of YKP.

31 Conner B, Mago A, Middleton-Lee S. (2014) *Sexual and reproductive health needs and access to health services for adolescents under 18 engaged in selling sex in Asia Pacific*

32 De Lind van Wijngaarden, JW (2016) *Changing Gears: A guide to effective HIV service programming for gay men and other men who have sex with men in Asia*, APCOM

33 WHO (2015) *A Technical Brief: HIV and Young People who Inject Drugs*

Developing SMART (specific, measurable, appropriate, realistic, timebound) objectives can be tricky. There are many organisations that have their own, unique ways of formulating objectives, and indeed there are many 'right' ways to do this. In general, objectives should be the smaller, achievable steps that an organisation can take toward achieving their goal. Whilst you may only have one goal for a programme, you will likely have two or more objectives. One formula used for writing program objectives is:³⁴

To	[action] - e.g. increase
The	[specify what] - e.g. the number of SRH service providers who understand the realities and needs of YKP
Among	[specify population, geography] - e.g. in the southern district of x city
From - to	[baseline to desired level] or [by x percent] or [to specific level] - e.g. by 50%
By	[time frame] - e.g. by the end of 2019

Resources

- IPPF (2006) *Proposals that work: A systematic guide to planning HIV projects*
- The PACT (2014) *Advocacy strategy toolkit*

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is

not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Have we developed a goal and objectives with YKP for our programme? Has this been done in consultation with YKP?
- Have we defined our goal as our vision for the future for YKP in our context?
- What are 'rights-based' programmatic goals and objectives?
- Do our programme goals and objectives focus on changing behaviours or identities? If so, how does that affect how we plan our programme for YKP?
- Do our programme goals and objectives focus on respecting/protecting/fulfilling rights, reducing harm, and building capacity amongst YKP? If so, how does this affect how we plan our programme for YKP?
- Have we done a 'rights' audit of our programme log frames? If not, is there a YKP-focused group that could help us with that?

Inspire and improve

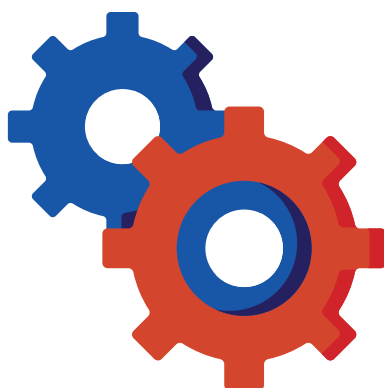
There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

- [Transgender Rights are Human Rights](#)
- [A Young Transgender Story: YKP Realities, a series of short documentaries on the lives of young key populations in South Asia](#)
- [Lost in Translation, Young people and drugs in Nepal](#)

34 Adapted from Khan M. E. 2011. Monitoring and Evaluating of Sexual and Reproductive Health services: Key Considerations and Challenges. Population Council. Presented in SVRI Forum 2011, Cape Town, pg. 17 cited on UN Women (no date) [SMART objectives](#).

PROGRAMMING

3



ESTABLISH SUPPORTIVE SYSTEMS AND MANAGEMENT

Share and learn

YKP-led networks and organisations are often not formally registered in their countries and may need support with administrative tasks. Donors, international organisations and partners who are working with YKP need to establish supportive systems to cover a range of needs including fiscal hosting, building financial and management capacities, and generally transferring knowledge so that the YKP can, in future, apply for funds and take charge of their own programming.

This kind of supportive management can be achieved by building trust (refer to Foundation 1); putting in place mentorship mechanisms that enable YKP to feel empowered; building their leadership skills; allowing YKP-led organisations to make mistakes; and - quite importantly - being transparent (refer to Programming 1). Ensuring that YKP understands exactly what is expected from them, how much funding is available for what purpose, and what kind of support they will get is necessary to ensure that they are

able to contribute meaningfully to designing, implementing and monitoring a programme. This, in turn, helps them to occupy greater space at policy-making and decision-making platforms and have a louder voice.

In essence, adopting feminist management or partnership principles enables YKP to build their capacities and for mutual knowledge transfers to take place. 'Feminism' means the belief in the social, political and economic equality of the sexes. This equality can only be achieved by challenging the social structures that create power imbalances, not only between males and females but between anyone considered to be of 'higher status' in any given society (e.g. someone who is rich, someone who doesn't use substances, someone who has a job, someone who is educated, someone who has a home) versus those considered to be of 'lower status' (e.g. someone who is poor, someone who uses substances, someone who is unemployed, someone who is uneducated, someone who lives on the street). Therefore, removing the social

structures that create these imbalances benefits not only women (who tend to be of 'lower status' compared to men), but also others who face inequality and discrimination, like many YKP (as highlighted before). The box below explains an approach by CREA (a feminist, human rights organisation) that explains how to transform inequalities between young people and adults.

Feminist management involves 'fairness, justice and equity' and the attempt to 'keep issues of gender, race, social class, sexual orientation and ability at the forefront.'³⁵ It is oriented towards re-distributing power and re-distributing responsibilities, i.e. between adults and young people, and transforming social inequalities. This type of management calls for a change, not only in how an 'adult organisation' engages with YKP but also in how the 'adult organisation' functions within. YKP-led organisations need to keep in mind that they do not end up adopting the power dynamics and hierarchies of 'adult organisations' but instead evolve their own feminist management styles that are enabling and inclusive of *all* young people and challenge power structures.³⁶

Some ways of putting supportive management into practice include:

- Putting young people into positions of responsibility and trusting them to deliver on what has been specifically asked of them, as well as providing mentorship or capacity building where needed
- Ensuring regular, transparent and honest communication between adults and young people so that expectations, progress, and challenges can be discussed
- Adult partnership and support that allows young people to make mistakes without fear of punishment, and the knowledge that they will receive constructive assistance to rectify them

- Creating strategies and structures for young people's leadership, where young people can clearly see a trajectory of progress for their own roles, as well as for the programme
- Dealing with intergenerational power dynamics, especially where these are influenced by cultural norms and values³⁷
- For youth-led management to be supportive and, the young people in leadership positions need to remember that they will age out and must build a second line of leadership to take over after them
- Young people need to hold leadership accountable - for this, they will need to adopt democratic processes for putting their peers into positions of power

Examples:

- A multi-country advocacy project on young people's SRHR appointed young people as the in-country coordinators of the advocacy coalitions. These young people were supported to perform their duties through capacity-building, mentorship provided by adults in the coalitions, and by enabling them to meet, share and learn from each other. In the Asia-Pacific region, this Dutch-funded project, called Right Here Right Now, is currently implemented in Bangladesh, Pakistan and Indonesia.
- The International Planned Parenthood Federation adopted a youth-centred approach wherein young people are at the centre of all programming and decision-making. This approach came about after several years of progression through youth consultation, meaningful youth participation, youth-adult partnership, youth leadership development and finally at a youth-centred approach (similar to what has been described in the Flower of Participation).

35 Batliwala, S. & M. Friedman (2014) *Achieving Transformative Feminist Leadership: A Toolkit for Organisations and Movements*

36 Batliwala, S. & M. Friedman (2014) *Achieving Transformative Feminist Leadership: A Toolkit for Organisations and Movements*

37 Van Reeuwijk, M. & A. Singh (2018) *Meaningful Youth Participation as a way to achieving success - Results from operational research on meaningful youth participation in a large-scale youth SRHR program in Africa and Asia*, Canadian Journal of Children's Rights, Vol. 5 No. 1

- Youth LEAD has been receiving consistent financial and technical support from UNFPA APRO, UNAIDS RST, UNESCO AP and UNICEF EAPRO since 2010 and from 2013 Robert Carr Fund (RCF) started providing major core funding. With all these support, Youth LEAD strengthened its program and system. In 2016 Youth LEAD formed a consortium with Y-PEER to bid successful three years grant from RCF and in 2018 the two members consortium bulged to four youth-led members adding Y+ (a global network of young people living with HIV) and Youth RISE (a global network of young people who use drugs). To add the consortium also successfully bid the Global Fund CRG-Strategic Initiative grant for 2.5 years.

Resources

- IPPF (2014) *Young at Heart: How to be youth-centered in the 21st century*
- Batliwala, S. & M. Friedman (2014) *Achieving Transformative Feminist Leadership: A Toolkit for Organisations and Movements*, CREA
- Van Reeuwijk, M. & A. Singh (2018) *Meaningful Youth Participation as a way to achieving success - Results from operational research on meaningful youth participation in a large-scale youth SRHR program in Africa and Asia*, Canadian Journal of Children's Rights, Vol. 5 No. 1
- Ahumada, C, K Dekkers, A Mesman, L Saleh and J van Vliet (2009) *Youth-led Organizations and SRHR: A step by step guide to creating sustainable youth-led organizations working on Sexual and Reproductive Health and Rights*, Youth Coalition & CHOICE
- FRIDA | The Young Feminist Fund (2017) *Resource Mobilization Toolkit for Girls, Young Women and Trans Youth*

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is

not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- What hierarchies and inequalities exist in our society? How are they harmful and to which groups or individuals?
- Do our systems in any way perpetuate inequalities and hierarchies that exist in our society?
- How can we change our systems and management to ensure that we are not replicating inequalities and hierarchies in our organisation and programmes?
- What concrete steps or measures can we put in place to ensure that we are promoting the rights of everyone who works within our organisation?
- What training is needed for our staff members, board members, advisers, volunteers, etc to ensure that we're adopting supportive, 'disruptive' systems?
- What does it mean to be 'rights-based' in the way that we manage people?
- Have we developed a management framework that will support the leadership and growth of YKP?
- Have we worked with YKP to understand how our organisation may (inadvertently or unintentionally) perpetuate inequalities or hierarchies that they face?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations are working to strengthen their organisational capacity, focusing on the development and management of their organisations. Youth organisations are only effective and sustainable in their advocacy and outreach when grounded within strong structural foundations.

Organisational Development and Change Manual and Assessments

Youth LEAD and UNDP, Being LGBTI in Asia and the Pacific

Organisations that work with complex and sensitive issues such as HIV and key populations must be dynamic and responsive, and sometimes their advocacy work can be incredibly challenging. Young people working in advocacy are acknowledged for their creativity and resilience, however, to ensure sustainability and accountability organisations must also abide by specific structures, mainly when responsible for the management of funding provided by donors.

In 2019, the 4Youth Consortium, comprising Youth LEAD, Youth RISE, Y+ Global and Y-Peer Asia Pacific Centre conceptualised the idea for a tool or a guide to help, in particular, youth-led organisations think about organisational development and capacity building. Youth-led and youth-serving organisations often struggle with day-to-day operations; a lack of governance structure and/or poor organisational management can create challenges in organisational development and growth. Therefore, it's important to build and strengthen structural foundations and identify key areas for change. Although for a lot of youth organisations, passion and expertise are evident, they may need to learn further how to run the 'business side' of their advocacy work to realise their full potential.

The **Organisational Development and Change (ODC)** manual was developed in 2020 by Youth LEAD to guide youth-led organisations through the development and growth of their organisations with tools, workable and accessible frameworks, in a language that is youth-friendly and easy to understand. The manual is divided into two streams of learning; **how to develop an organisation and how to assess an organisation?** In summary, the manual guides readers through **four steps; identifying the structural needs of an organisation, reviewing existing organisations complements, setting the level of dried change and how to turn assessment into action.** The manual is targeted explicitly at grassroots, smaller youth-led organisations, those working at the community/local or national level, registered or fiscally hosted, and volunteer-based groups.

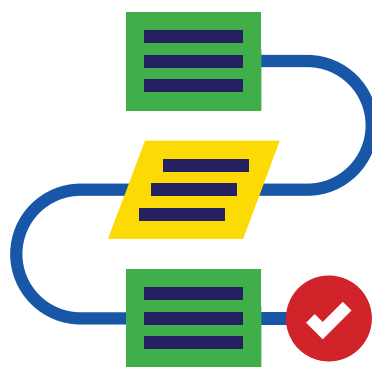
In 2020, Youth LEAD was awarded funds by *UNDP, Being LGBTI in Asia and the Pacific* to support the country-led assessment of three of Youth LEAD's network partners; *Myanmar Youth Stars*, *Youth LEAD Mongolia* and *Ya_All*, India. The internal assessments allowed organisations to reflect on their foundations, the structure, organisational management but also promoted cross-sharing of findings between network partners. The process encouraged youth organisations and networks to reflect on their strengths and weaknesses, and the action plans based on the ODC assessments by each organisation were geared towards enhanced leadership and sustained advocacy for youth and YKP- led organisations.

To access the Organisational Development and Change manual visit youthleadap.org/resources



PROGRAMMING

4



DESIGN A PROGRAMME

This section is designed to help programmers and the agencies that fund them understand the various intervention areas that YKP believe are important. These lists of activities are not exhaustive by any means; rather, they are meant to start the ball rolling when designing a programme.

'There are many agencies running programs but none of them works for YKP, so if there would be youth-friendly services then many YKPs would come to the program.'

Regional survey respondent (Nepal)

Insofar as it was possible, the interventions/strategies listed were drawn from resources and organisations specific to the Asia Pacific, including Youth LEAD members. That said, Asia Pacific is an incredibly diverse region and not all interventions will work in every context. Interventions should be chosen carefully based upon the work already

completed to partner with young people; to identify the young key populations with which the programme will work; to pinpoint their most pressing needs, and to develop programmatic goals and management structures. There are no one-size-fits-all models for programming for YKP in the Asia Pacific or anywhere else!

Anti-discrimination, stigma and violence

Share and learn

Young key populations can face several layers of stigma, discrimination and violence due to their identities, professions, and behaviours. Many YKPs have several identities, e.g. a young person who uses drugs might also engage in sex work, or a young trans* person might engage in sex work. This intersection of identities leads to more and more layers of stigma (which refers to a negative attitude towards a person or group of people who face a certain condition, disease, disability or another characteristic), discrimination

(which refers to the unfair treatment of one particular person or group of people because of the person's sex, religion, nationality, ethnicity (culture), race, social position or other personal traits), and sometimes violence (which refers to verbal/psychological, physical, and/or sexual violence). It is important to be aware of these issues, how they affect YKP and to take action to mitigate the effects as well as prevent stigma, discrimination and violence against YKP by the wider society.

YKP experience discrimination, stigma and violence in a variety of different settings, including health care facilities, schools, NGOs, families, communities and more. Depending upon the context, interventions designed to end discrimination, stigma and violence should be designed for each setting.

Resources

- UNESCO (2015) *From Insult to Inclusion: Asia-Pacific report on school bullying, violence and discrimination on the basis of sexual orientation and gender identity*
- UNESCO et al (2018) *CONNECT WITH RESPECT: Preventing gender-based violence in schools - Classroom Programme for Students in Early Secondary School (ages 11-14)*
- APN Plus et al (2016) *Lost in Transitions: Current issues faced by adolescents living with HIV in Asia Pacific*
- HIV Young Leaders Fund (2014) *Sexual and reproductive health needs and access to health services for adolescents under 18 engaged in selling sex in Asia Pacific*
- YouthLEAD (2015) *Our Rights Matter Too: Sexual and Reproductive Health and Rights of Young Key Populations in Asia and the Pacific*

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- In what ways do YKP face discrimination in your context? What about stigma? Violence?
- Who are the perpetrators of discrimination, stigma and violence? Is your programme (or any other programme) working with them?
- What impact does discrimination, stigma and violence have on the ability of YKP to access programmes in your context? How can your programme help overcome these barriers?
- Are there any laws or policies that can be used to advocate for anti-discrimination or educate against violence and discrimination? These could either be focused on YKPs specifically or be more general.
- Do you know of or have links with organisations that are providing legal aid and support to KP/YKP?
- Is there any documentation of the extent and type of stigma and discrimination and/or violence faced by YKP, which can inform your programme design?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

All YKP

- Use anti-discrimination legislation or policy, where available, to advocate for further protections for YKP in workplaces, schools, health facilities and communities
- Sensitize health professionals, educators, social workers, religious/faith-based leaders and employers on the rights of YKP
- Identify specific health providers/services that can be reached in an emergency and counted upon to provide swift and non-judgemental care, e.g. for a drug overdose, SGBV, other physical harm, etc.
- Create links with legal aid, social welfare, and social security services that are accessible to young people, youth-friendly and know how to deal with YKP issues

- Work with law enforcement agencies to sensitise them on anti-discrimination and juvenile justice legislation, inform them about the particular issues faced by YKP, and identify champions for YKP who can be reached out to in case of emergencies, e.g. police raids or harassment
- Ensure that organizations that work with young people, especially YKP, have accessible complaints mechanisms and platforms (e.g. phone hotline) where YKP can report cases of discrimination, violence, etc.
- Build the capacity of community-based organizations to develop community-based reporting and monitoring mechanisms on stigma, discrimination and violence
- Ensure that reporting mechanisms for YKPs have reliable documentation, monitoring and evaluation mechanism in order to gather national and sub-national data on violence and discrimination against YKPs
- Ensure data collection methods capture, identify, and highlight case studies that can be used for evidence-based advocacy
- Engage with families, community members, and leaders to raise awareness and social support on YKP issues and decrease stigma and discrimination
- Find allies among religious and community groups who can advocate for YKP acceptance within their religious and community denominations

Policy and legal advocacy

Share and learn

Laws and policies are often a barrier to accessing information, health services, education, employment and redress for young people, but particularly so for young key populations. Many of their actions or identities fall outside the law in the Asia-Pacific region since the laws tend to be restrictive. Similarly, policies around education, health or discrimination themselves tend to exclude or discriminate against YKP. It is important to remember that laws and policies change and evolve based on the socio-cultural

and political context of a country. This means that citizens can work towards convincing law and policy makers of the need and importance of changing laws and policies to be more inclusive, sensitive to inequity, and ensure that rights of all are respected, protected and fulfilled. This is what policy and legal advocacy are about - engaging in a series of targeted actions that will result in influencing political decision-makers to change in support of a cause. Remember that in some countries, you need to engage in such advocacy, not only at the national level but also at the state / provincial/regional level within a country as some areas such as education and health tend to be governed more locally than nationally.

Resources

- [Asia-Pacific Interagency Task Team on Young Key Populations et al \(2018\) Young People and the Law in Asia and the Pacific: Legal Advocacy Toolkit](#)
- [UNESCO et al \(2014\) In or Out? Asia-Pacific Review of Young Key Populations in National AIDS Strategic Plans](#)
- [Youth Voices Count \(no date\) Advocacy agenda](#)
- [UNESCO et al \(2013\) Young people and the law in Asia and the Pacific: A review of laws and policies affecting young people's access to sexual and reproductive health and HIV services](#)
- [Sexual Rights Initiative \(no date\) National Sexual Rights Law and Policy Database](#)
- [IPPF \(2016 - 2017\) Overprotected and Underserved: The Influence of Law on Young People's access to Sexual and Reproductive Health in Nepal, India, Sri Lanka, Philippines, Malaysia, Indonesia](#)
- [Equaldex \(no date\) LGBT laws by country](#)
- [Institute of Development Studies \(no date\) Sex Work Law Map](#)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking

themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Did you identify a law or policy that restricts YKP's access to information, either directly or indirectly?
- Did you identify a law or policy that restricts YKP's access to sexuality education, either directly or indirectly?
- Did you identify a law or policy that restricts YKP's access to SRH or HIV services, either directly or indirectly?
- Did you identify laws or policies that cause confusion amongst YKP or health professionals as to their right to access SRH or HIV services?
- Did you discover that YKP are unaware of their rights to access SRH and HIV information, education and services?
- Is it possible to effect legal change in your context at this current moment in time? If so, which organisations have the expertise needed to design a legal reform strategy? If not, what can be done to minimize the harmful effects on YKP?

- Are there guidelines that create clarity for health professionals and educators on YKP's rights? For example, in relation to the age of consent to medical services?
- Do you have allies in legislative bodies or government agencies that can support your advocacy?
- Is there a way for YKP to seek information on their rights in a way that is accessible? If not, is there scope for an informational campaign using channels that young people use?
- Is the general public aware of YKP's rights to information, education and services? If not, is there scope for an awareness-raising campaign?
- Do you have human voices of YKP to complement your advocacy strategy?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

Over-protected and Under-served Research

Nepal, India, Sri Lanka, Philippines, Malaysia, Indonesia

Between 2014 and 2017, the International Planned Parenthood Federation undertook research studies in six countries on how laws and policies impact upon the ability of young people - including YKP - to access SRH services. The studies presented the laws that impact upon SRHR, then presented qualitative data from young people on their perspectives, opinions and realities. Most of the reports covered the law as it relates to sex work, as well as laws that criminalize same-sex sexual behaviour.

Human rights project

Blue Diamond Society, Nepal

Through its human rights work, the Blue Diamond Society (BDS) of Nepal is undertaking advocacy efforts with a range of stakeholders that impact on the rights of key populations, including young key populations. These groups include police, ministries, media and policy-makers. They do human rights violations documentation and have a training programme for the police. The project also provides platforms for YKP to get involved, including 'Miss Pink' and 'Mr Gay Handsome' competitions, as well as international advocacy opportunities.

All YKP

- Conduct a thorough legal assessment of all laws and policies that restrict access to services directly or indirectly for YKP; run a communications campaign to raise awareness of the results
- Advocate for policy changes using a rights-based approach to decriminalize YKPs; i.e. decriminalize homosexuality, sex work, drug use, and de-pathologize transgender people
- Develop an advocacy strategy with a coalition of YKP-led and other organisations who want to see legal or policy change that would allow greater access to all services (including reducing ages of consent to services)
- Advocate for clarity from the Ministry of Health on when, where and how YKP can access services to dispel myths and misconceptions amongst health professionals and YKP
- Advocate with the Ministry of Education to ensure that YKP are not bullied or discriminated against in educational institutions, and for provision of comprehensive sexuality education that addresses SOGI/E
- Support YKP groups in addressing their issues to parliamentarians, getting involved in different policy development stages, analysing policy implications and implementation including budgets
- Reach out to the national human rights institution in your country and raise your advocacy asks with them in the context of human rights

Young MSM

- Build solidarity across women's rights, young people's rights, sexual rights, and LGBTQ rights movements to ensure that sexual orientations and gender identity/expression is not criminalised
- In a situation where the law criminalises same-sex activity among minors (i.e. <18), advocate for health service providers to have clarity that all young people should have the right to access services

Young people engaged in selling sex

- Advocate for anti-trafficking and child protection laws to be designed and implemented with a 'do no harm' approach (e.g. 'rescue and rehab' of young sex workers should not result in marginalisation and lack of health services; or mistreatment by law enforcement agencies; or increase the vulnerability of young sex workers by pushing them underground)

YPUD

- Advocate for YPUD's access to needle and syringe programmes (NSPs), opioid substitution therapy (OST) and other evidence-based drug dependence treatment or harm reduction programmes
- Advocate for legal and policy reforms on decriminalization of drug use and the age of consent for services
- Advocate for the expansion of community-based settings which provide youth-friendly harm reduction and drug treatment services
- Advocate for inclusion of education on drugs and drug use for YKP in order for them to make informed decisions, and ensure evidence-based IEC materials are made adequately available
- Educate law enforcement agencies on drug use issues so that they become supportive, rather than violating the rights of YPUD through intimidation, violence, corruption or otherwise
- Support formation of support groups of YPUD so that they have a safe space among themselves
- Ensure para-legal services are made available for YPUD who are in need of legal assistance

Young people who identify as trans*

- Advocate for gender recognition policies and name-change policies, especially for accessing education, employment, health services, unemployment benefits, etc.
- Advocate for specific laws to protect the safety, rights, and dignity of people who identify as trans*
- Advocate for policies allowing young people who identify as trans* to undergo gender-reaffirming surgery if they want it

YPLHIV

- Advocate for laws and policies that prevent stigma and discrimination against PLHIV
- Advocate for laws and policies which protect the right of PLHIV to access education, health, and other relevant services
- Advocate for strengthened laws that ensure confidentiality and security of YPLHIV
- Advocate for legal and policy reforms on the age of consent in accessing HIV testing and treatment services
- Ensure that full and complete information on living with HIV is made available for YPLHIV in order for them to make informed decisions, including complete awareness of preventive measures that would contribute to the prevention of transmission to their sexual partners, spouse, or through other behavioural practices
- Ensure that HIV treatment literacy is provided to all YPLHIV which would contribute to enhancing their quality of life
- Support formation of support groups of YPLHIV if they feel uncomfortable mixing with groups of adult PLHIV

Social and community mobilisation

Share and learn

In order to create an enabling environment in which YKP can have access to information, services, the ability to make decisions for themselves and act on them, and be included in society, social and community mobilisation is required. This means that families, peers, community members, teachers, health providers, employers, and other members of the general public need to understand and be sensitive to the needs and realities of YKP. Through social mobilisation, online (including through social media) and offline messages can be delivered to diverse audiences. Community mobilisation refers to more in-depth engagement in dialogue with various people who have an influence on and can be influenced by YKP.

Online platforms and other kinds of information communication technology (ICT) can play a large role in YKP's access to information and services (see Foundation 2 - 'Practices' section). When YKP live in conservative communities, finding other males who have sex with males, trans* persons or young people from other excluded groups through ICT can be affirming and help build a sense of belonging. Using these platforms to provide SRH information and links to services is important. Before social or community mobilisation begins, part of a needs assessment should be - taking stock of which online platforms are most commonly used by each YKP group in any given context.

'In Mongolia, religious leaders are not really strong for community involvement, but our society agrees [that] the parents can decide their children['s] destiny. Most YKPs are afraid to come out to their parents, so they usually hide [from] them until death.'

Regional survey respondent (Mongolia)

Resources

- [LinkUp \(2016\) Upholding the rights of young women who sell sex in Myanmar](#)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Which groups of people are 'allies' of YKP in your context? Which are not? How can the allies be included in programmes aimed at the fulfilment of YKP's human rights?
- What are the risks to your programme of not including members of YKP's communities?
- Have you done a scan of what is already being done with regard to social and community mobilisation around YKP needs and rights?
- Have you asked YKP to identify their 'circles of influence' or who they understand to be their 'community' (e.g. these could be their family members, or other / older KPs, etc.)?
- Do you know what are the best channels to reach these community members that have been identified (i.e. through group discussions, IEC campaigns, online media, etc.)?
- Have you done an analysis of how the media covers YKP (i.e. is it stigmatising or supportive)?
- Are you aware of celebrities or community / religious leaders who are supportive of YKP and can partner with you?
- Advocate and promote/provide assistance for the legal registration of youth/YKP-led and youth-serving CSOs in order to strengthen their capacities
- Hold intergenerational dialogues between YKP and their parents to raise awareness of YKP rights and health, and between YKP and adult KP to generate support for young people's particular issues
- Find allies among religious and community groups who can advocate for YKP acceptance within their religious and community denominations
- Sensitize community members to the rights and needs of YKP

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

All YKP

- Conduct tailored offline and online messaging campaigns, using international, regional or national human rights days, to raise awareness of YKP rights
- Partner with local celebrities to increase the reach of public awareness campaigns
- Sensitize media agencies on using rights-based language when reporting on YKPs
- Develop and implement a media guideline on proper YKP language to share with major outlets
- Partner with adult key population and PLHIV organisations to consolidate efforts and run joint campaigns

Establishing an MSM/TG network to reduce HIV vulnerability in Malaysia

PT Foundation Yayasan PT

From late 2011 till the end of 2017, PT Foundation Malaysia (a community-based organisation working with key populations) focused on mobilising and building the capacities of MSM and TG groups in different parts of the country. The idea was to bring informal groups of MSM and TG into a national network that would focus on fighting for their sexual health and rights. The project provided coaching and mentoring in organisational diagnosis, strategic planning, and proposal writing, as well as financial assistance to keep up the momentum for organisational growth and sustainability.

As more community members became aware of their human rights through the SOGI Workshops and Training on Networking and Advocacy, they increasingly expressed their need to work together. Multi-Stakeholder Forums provided national and state / city-wide platforms for discussions among key populations and relevant stakeholders, such as the Government, religious and police authorities, among others.

Comprehensive sexuality education

Share and learn

YKP need information, values and skills to understand their own sexuality and sexual and reproductive health and rights, as well as make informed decisions, and act upon them, in relation to their own bodies and sexuality. This can be done through access to comprehensive sexuality education (CSE) - defined in the box.

'Comprehensive sexuality education (CSE) is a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality. It aims to equip learners with knowledge, skills, attitudes and values that will empower them to: realize their health, well-being and dignity; develop respectful social and sexual relationships; consider how their choices affect their own well-being and that of others; and, understand and ensure the protection of their rights throughout their lives'³⁸

CSE can be provided in-school as well as out-of-school, by teachers or peers, must be based on human rights and gender equality, and focus on developing life skills that young people, including young key populations, need to support healthy choices.

Within educational settings, as well as providing CSE a whole-school approach towards healthy and safe schools must be taken. This includes adopting policies against bullying and discrimination, ensuring training of educational staff to address gender inequality and sexual and gender-based violence, creating supportive

environments for students to prevent bullying based on sexual orientation and gender identity/ expression, and linking with relevant services.

Resources

- UNESCO (2018) *Revised edition of the International Technical Guidance on Sexuality Education: An evidence informed approach*
- UNESCO (2013) *Sexuality Education Review and Assessment Tool (SERAT) - new version forthcoming in 2019/2020*

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Are CSE programmes in your context reaching out-of-school young people, including YKP? Are the programmes going to the places where YKP congregate and feel safe going?
- Do you know the government policy/ legislation on the provision of CSE, and whether / how it is being implemented?
- Have you analysed the CSE policy and/or curricula to see if it includes issues affecting YKP? Have you analysed the curricula to ensure that norms contrary to YKP's rights are not included?
- How are the teachers and peer educators in your own organisation been trained to ensure that your CSE programmes are inclusive of the realities that YKP face?
- Do you know if YKP were involved in the development of CSE content? If not, is there scope to advocate for their inclusion in the next round of revisions?

38 UNESCO (2018) *Revised edition of the International technical guidance on sexuality education: An evidence-informed approach*

- Do you know if any CSE curricula used by NGOs also includes YKP issues? If not, is there scope to revise it with YKP involvement?
- Are there any peer educators that are from YKP communities themselves? If not, can you train some?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

All YKP

- Work with the Ministry of Education to ensure that CSE is provided to the extent allowed for in the law; this may include reframing the language or terminology used so that policy makers are not threatened by 'sexuality' (e.g. healthy lifestyle education)
- Advocate for the inclusion of sexual and gender diversity as themes in the CSE curriculum and the use of language that is not heteronormative
- Provide trainings for educators on creating a YKP-friendly school environment, including in their provision of CSE
- Advocate for CSE to go beyond HIV, to include information on how to live well as a PLHIV and how to reduce stigma and discrimination against PLHIV
- Provide CSE through innovative, online platforms that YKP can access easily within a particular country / geographical context, including content that is specific to their needs and realities
- Ensure that YKP are involved in the development of CSE curricula and teaching and learning materials
- Provide CSE in community-based, out-of-school settings to reach YKP who are not in educational institutions

Services

Share and learn

Young key populations, like all other people, need access to a variety of services that promote and protect their health and are specific to their needs, including HIV treatment, care and support; sexual and reproductive health services; harm reduction services (needle-syringe exchange, opioid substitution therapy); hormone replacement therapy; gender-affirming surgery; legal services; mental health services; and psychosocial services. There is no one-size-fits-all model for service delivery to YKP; the models used depend upon the cultural context, target population, funding available, and myriad other factors.

'Since we, YKP get services from NGO and community organizations, I believe donors understand our issue more than the government.'

Young sex worker (Myanmar)

Even if YKP are able to overcome many of the existing hurdles, they may face additional barriers at the service provision level. Where health services exist for YKP, they are often not friendly or tailored to their unique, age-related needs, or are legally restricted. Further, confidentiality is often breached by service providers who believe it is their job to 'protect' young people by referring them to social services, police or parents. Thus, the combined effect of restrictive laws and policies, age-related restrictions and social norms, lack of education and awareness, poverty and discrimination play out in:

- Services not being available for YKP
- Service providers being discriminatory/ judgemental against YKP, or not having the expertise to address their concerns
- YKP not knowing about services that might be there for them

The HIV and sexual and reproductive health service needs of key populations ('the what'), including YKP, has been detailed at length elsewhere (see 'Resources' box below). This section focuses more heavily on strategies for reaching YKP ('the how'). It should be noted that whilst there are specific services and strategies for specific groups of YKP, providers should never assume that these identities are mutually exclusive. For example, a young person who uses drugs may also engage in selling sex with men and women. Services should be free of assumptions about young people's behaviour and, instead, be led by the expressed and real needs of each young client.

Resources

- Youth LEAD (2020) *Health Care Workers Manual Training: For YKP Friendly Services in Asia Pacific* (forthcoming)
- WHO et al (2015) *A technical brief: HIV and young people who inject drugs*
- WHO et al (2015) *A technical brief: HIV and young people who sell sex*
- WHO et al (2015) *A technical brief: HIV and young men who have sex with men*
- WHO et al (2015) *A technical brief: HIV and young transgender people*
- WHO et al (2015) *Implementing comprehensive HIV and STI programmes with men who have sex with men: Practical guidance for collaborative interventions*
- WHO et al (2015) *Implementing comprehensive HIV/STI programmes with sex workers: practical approaches from collaborative interventions*
- WHO et al (2017) *Implementing comprehensive HIV and HCV programmes with people who inject drugs: Practical Guidance for collaborative interventions*
- WHO et al (2016) *Implementing comprehensive HIV and STI programmes with transgender people: practical guidance for collaborative interventions*
- Youth Voices Count (2018) *We Want PrEP: A Qualitative Analysis of Adolescent Gay, MSM and Transgender People's Willingness to Use PrEP*
- Youth Voices Count (2015) *Discussion paper: Access to HIV health services for young MSM and young transgender persons in Asia and the Pacific*

- Youth Voices Count (2018) *Young and High: A Rising Reality. A qualitative analysis of drug use amongst young gay, bisexual and MSM in sexualised settings in Hanoi, Bangkok and Jakarta*
- Youth Voices Count (2018) *Creating friendly health services for young people - Facilitation Guide* (not yet online)
- HYLFI (2014) *Sexual and reproductive health needs and access to health services for adolescents under 18 engaged in selling sex in Asia Pacific*
- Pacific Sexual Diversity Network, WPATH, Health Policy Project et al (2015) *Blueprint for the Provision of Comprehensive Care for Trans People and Trans Communities*
- APCOM (no date) *PrEPMap: Guide to PrEP in Asia Pacific*

Harm reduction: What is it?

Harm reduction refers to policies, programmes and practices that aim primarily to reduce the adverse health, social and economic consequences of the use of licit and illicit drugs. The harm-reduction approach is based on a strong commitment to public health and human rights and targets the causes of risks and harms. Harm reduction helps protect people from preventable health harms and death from overdose and helps connect marginalized people with other social and health services. The UN system has endorsed a core package of nine essential harm-reduction services for people who inject drugs which have been shown to reduce HIV infections:

1. Needle and syringe programmes (NSPs)
2. Opioid substitution therapy (OST) and other evidence-based drug dependence treatment
3. HIV testing and counselling (HTC)
4. Antiretroviral therapy (ART)
5. Prevention and treatment of sexually transmitted infections (STIs)
6. Condom programmes for people who inject drugs and their sexual partners
7. Targeted information, education and communication (IEC) for people who inject drugs and their sexual partners
8. Prevention, vaccination, diagnosis and treatment for viral hepatitis
9. Prevention, diagnosis and treatment of tuberculosis (TB)³⁹

39 WHO (2016) *Consolidated Guidelines on HIV prevention, diagnosis, treatment and care for key populations*

‘In Indonesia, if you want to access health services, especially test HIV for adolescents under 18 years, [you] must have a letter of permission from parents or guardians. That is the obstacle when YKP will test for HIV. So they become lazy and afraid to access health services HIV test.’

Regional survey respondent (Indonesia)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

SRH SERVICES

- How have you worked with YKP to identify their SRH/HIV service needs?
- How have you identified which SRH services are available to YKP and which ones are not in the context where you work?
- Which barriers - legal or otherwise - exist to YKP's access to SRH/HIV services?
- How friendly are providers to YKP in your organisation? In other organisations in your context?
- How do the services available take into account YKP's multiple, overlapping needs and identities? How friendly are the referral services that you use for YKP?
- Which organisations already provide SRH/HIV services to YKP communities are you partnering with?
- What partnerships do you have with the establishments where YKP hang out, work or live in order to better conduct outreach?

- If you're providing services to adult key populations, how do those need to be tailored to young people's needs?
- What are the needs of different young key population groups?
- How are you advertising your services so that they are appealing for YKP and so that YKP feel safe and comfortable accessing them from your organisation?
- What is your organisation's policy on providing SRH services to young people (including YKP) who are under the age of sexual consent? What is your policy on parental consent? Are these policies based in law or your own organisation's values? How do these policies (and others within your organisation) facilitate or obstruct YKP's access to services?
- Does your organisation adopt a rights-based approach to service delivery? If so, what does this mean in practice for every single staff member and volunteer in your organisation (including administrative, cleaning and other staff who come into contact with YKP)?

NON-SRH SERVICES

- How have you worked with YKP to identify the needs that they have other than SRH services?
- How have you identified which legal, mental health and other services are available to YKP and which ones are not in the context where you work?
- Which barriers - legal or otherwise - exist to YKP's access to these services?
- How friendly are providers to YKP in your organisation? In other organisations in your context?
- How do the services available take into account YKP's multiple, overlapping needs and identities?
- Which organisations already provide SRH/HIV services to YKP communities are you partnering with?
- What partnerships do you have with the establishments where YKP hang out, work or live in order to better conduct outreach?

- What is your organisation's policy on providing any kind of services to young people (including YKP)? What is your policy on parental consent? Are these policies based in law or your own organisation's values? How do these policies (and others within your organisation) facilitate or obstruct YKP's access to services?
- Does your organisation adopt a rights-based approach to service delivery? If so, what does this mean in practice for every single staff member and volunteer in your organisation

(including administrative, cleaning and other staff who come into contact with YKP)?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

Taiwan's HIV/AIDS Prevention and Control manual

Center for Disease Control

Taiwan's government has issued a manual for healthcare providers who work with PLHIV under the age of 20. The manual provides recommendations to providers and social workers regarding parental notification; these include:

- Youth under age 14 require parental involvement and legal representation
- Youth above 14 can be provided with counselling without parental consent to identify whether they should proceed to inform parents or not, and how to proceed to treatment
- If the young person decides to disclose her/his HIV status to their parents, the service provider will assist disclosure to the young person's parents, and provide support in school life and career
- If not informing the parents, the service providers will conduct an assessment to consider the impact of non-disclosure of treatment to the young person; follow-up and monitor treatment every 3 months, as well as provide reinforcement to disclose with parents

Deaf Talks

Bahaghari Center for SOGIE Research, Education and Advocacy, Inc, Philippines

Deaf community members continue to be at a disadvantage when accessing services, including HIV services. In the Philippines, for instance, the gatekeepers to services are almost always hearing people who are limited by their lack of familiarity with Filipino Sign Language (FSL). The project Dea Talks has two components:

1. The first was the development of public service announcements (PSAs) that provided basic HIV know-how in FSL. These PSAs dealt with myths and misconceptions surrounding HIV and testing.
2. The second component was the provision of community-based HIV screening and testing trainings among deaf community members in three cities in the Philippines.

This project was designed to reach young deaf Filipinos belonging to key affected populations (KAPs), including LGBTQIA, trans women, and men who have sex with other men and their female partners. By the end of the project, the PSAs had been viewed nearly 250,000 times and 31 deaf Filipinos had been trained as HIV screeners/testers.

HIV Risk Reduction for young MSM and sex workers

ROLi, Philippines

ROLi is an HIV risk reduction programme that uses a self-assessment toolkit, workshops and peer group work to help adolescent MSM assess and reduce their risk behaviours as individuals and groups, using the support of their peers and service providers. The programme serves 6,000 young people in the Philippines, the majority of whom are boys aged 13–17 years. Approximately 80% are out of school and 90% live in poverty. Almost all of them sell sex (sexually exploited) and use drugs, and almost all identify as straight (heterosexual).

Because young males who sell sex are highly stigmatized and difficult to reach, the programme uses several channels for outreach on a peer-to-peer basis. One-on-one interactions and group activities take place through contact with young people in their communities, including on the street and in areas where males seek sex with young males. They are given the opportunity to take a risk self-assessment on the spot, or to sign up for a workshop held at a partner health facility. Peer outreach workers also do outreach online through text messaging and through private chats with members of their social and peer networks.

Programme participants can join Facebook groups for moderated peer-to-peer discussions about behaviour change. In addition, peer groups organize campaigns showcasing inspiring stories of change through forums, film viewings and discussions, and awareness-building activities take place around village fiestas, festivals, World AIDS Day and anti-drugs events. Government-run clinics that partner with ROLi also provide one-on-one counselling and other services.

The ROLi programme has been adapted to serve other young key populations, including young females who sell sex and young people who inject drugs.

(<http://www.projectpage.info/my-river-of-life>, WHO Technical brief on YP who sell sex)

Comprehensive support for young people who sell sex in Myanmar

Aye Myanmar Association (AMA)

AMA is a network of more than 2,000 female, male and transgender people who sell sex which engages in capacity-building and community mobilization to advocate for their health and human rights. Working within a restrictive political environment, sex workers who are part of AMA have had to find innovative ways of reaching out to young people who sell sex to provide peer support and access to information and services, particularly in relation to their health. AMA community mobilization workers are trained to be particularly sensitive to the needs of young people and do not ask for any identifying information, such as their real names or ages when carrying out outreach.

Community mobilization workers provide STI and HIV prevention tools and strategies, and links to sex worker-friendly health facilities for testing and treatment, as well as follow-up counselling and care for young people who sell sex who are living with HIV. In a context of stigma and discrimination, young people who sell sex are often reluctant to access services for fear of arrest or of being treated badly by health-care professionals. Follow-up care focuses on discussing any barriers to adherence to treatment within a safe and supportive environment, and community mobilization workers offer to accompany young people to their clinic appointments.

AMA provides support to people who sell sex who are imprisoned, particularly ensuring that young people, who are often neglected or abandoned by their families, are given nutritional support while in prison. AMA also works to reconnect young people with their families and friends upon their release to ease the transition back into the community.

(Source: *WHO Technical brief on YP who sell sex*)

Cebu on the Move

*CebuPlus Association Inc,
Philippines*

The project was designed to bring HIV services to areas of Cebu that have not been reached or where these services are not regularly being offered. Specifically, it aimed to reach young key population groups in identified high-risk areas in Cebu which are either hard-to-reach or were overlooked by HIV programming at that time, including young MSM and young people who identify as trans*. The project was also implemented to mobilize young volunteers who were trained for peer education and HIV counselling and testing. In addition to reaching the target groups, the project succeeded in strengthening the partnership between the organisation and local government units for future interventions.

Drop-in Center for Women who Inject Drugs

Dristi, Nepal

Dristi is the only women-focused organisation focusing on harm reduction for people who use drugs in Nepal. Under this harm reduction programme, the organisation runs a drop-in centre, the main objective of which is to control the high risk of HIV infection amongst women who inject drugs. In total, the programme employs 5 female 'in-reach' workers, a director and a project officer. The in-reach workers are trained to provide information on a range of topics, including safer injecting, HIV, STIs, abscess management, overdose, harm reduction, gender-based violence, women's rights and SRHR. The programme also provides needle-syringe exchanges, HIV testing and referrals, legal aid for domestic violence, emergency shelter, and clothing and sanitary pad distribution. The programme has been able to meet a variety of needs of women who inject drugs in Nepal, including those that were previously hidden and hard-to-reach.

All YKP

SRH, including HIV, services:

- Consult WHO and NGO technical guidance on the service packages required by all YKP
- Provide health services and health-related information to the full extent allowed by law
- Draft and adopt a set of rights-based standards for service provision to YKP to which all providers adhere
- Provide a 'one-stop shop' where YKP can find the full range of services and/or referrals that they need
- Implement a peer provision service network that designates trained YKP who can deliver information and services that they can legally provide (e.g. condoms, pills) to other YKP in their communities
- Train health professionals on the rights and needs of YKP, as well as on how to provide friendly, non-judgmental, rights-based services to YKP
- Ensure accessibility to services for YKP who are disabled

Non-SRH services:

- Provide legal aid services to the full extent allowed by law
- Provide legal aid services to YKP who wish to know their legal rights and how to take action if they are violated
- Train legal professionals on the rights and needs of YKP, as well as on how to be friendly and non-judgmental to YKP
- Develop hotlines that address a wide range of needs of different YKP
- Conduct a mapping of which organisations provide youth-friendly services

Young MSM

SRH, including HIV, services:	Non-SRH services:
<ul style="list-style-type: none"> • Develop outreach to MSM who do not identify as part of the 'gay community' as well as those who do. • Do service and information outreach in places where MSM convene, such as bars and clubs • Partner with dating apps and use them as a platform to conduct surveys and provide information on HIV to MSM 	<ul style="list-style-type: none"> • Conduct human rights trainings/workshops and provide resources on the law that affect MSM, including other human rights documents relevant to sexual and gender minorities • Develop the leadership capacities and project/resource management of organizations led by or working with young MSM

Young people engaged in selling sex

SRH, including HIV, services:
<ul style="list-style-type: none"> • Work with entertainment establishment owners to encourage the promotion and provision of condoms in establishments where sex work may occur. Seek to partner on outreach programmes with establishment owners. • Provide access to counselling, testing, reproductive health and social support, and basic health care services through creative, innovative means such as the media (TV, radio, print, outdoor media), technology (text messages), and community education initiatives in areas known for sex work. • Create linkages to other services such as maternal and neonatal health and prevention of mother to child transmission (PMTCT) services for female sex workers; involve their male partners. • For those under 18, make sure they have access to information, services and condoms/lubricants to promote safe behaviours or if they wish, assist them in quitting sex work by providing necessary skills or education, reintegration with families if and where possible, and psychosocial counselling as part of child protection. • Provide primary health care and rights-based sexual and reproductive health and HIV services, through outreach work and mobile clinics. Special services that should be considered for male sex workers include access to condoms and lubrication, diagnosis and treatment of rectal and oral STIs, and counselling and medical support for transgender young people who take hormones or seek gender affirmation surgery • Sensitise project staff (from the project coordinator to the receptionists at the clinics) on the rights and needs of male and transgender sex workers as the first step to implementing effective and rights-based programs⁴⁰

Young people who identify as trans*

SRH, including HIV, services:
<ul style="list-style-type: none"> • Partner with well-known trans* activists or celebrities to promote the importance of SRH services for the community • Promote services through fashion shows and other community events attended by young people who identify as trans*

40 HYLFF (2014) *Sexual and reproductive health needs and access to health services for adolescents under 18 engaged in selling sex in Asia Pacific*

YPUD

SRH, including HIV, services:	Non-SRH services:
<ul style="list-style-type: none"> • Conduct outreach to YPUD in hard-to-reach places, such as prisons or other juvenile facilities that mainstream services may not reach 	<ul style="list-style-type: none"> • Map the harm reduction and drug treatment service providers in your province/state/district and sensitize them on the needs of YPUD • Build capacity of YPUD on outreach, harm reduction and other drug use related issues • Conduct mass education and awareness campaigns at the community level to counter their myths and misconceptions on drugs and drug use • Engage with the Ministry of Health, Education, Social Welfare, Law, Police and other key government stakeholders to sensitize them on the issues and needs of YPUD so that appropriate policy formulation takes place • Establish a hotline for crisis mitigation or for providing necessary information • Facilitate formation of support groups of YPUD • Conduct education and awareness campaigns at the community level to counter stigma and discrimination, and include families of YPLHIV • Conduct treatment literacy programmes for YPLHIV • Develop effective networks and linkages with HIV testing and treatment centres to ensure easy access to young people • Sensitize health care service providers on the specific needs and issues of YPLHIV • Engage with Ministries of Health, Education, Social Welfare, Law, Police and other key government stakeholders to sensitize them on the issues and needs of YPLHIV so that appropriate policy formulation takes place • Enable legal assistance for those YPLHIV who need it • Establish a hotline for crisis mitigation or providing necessary information • Facilitate the formation of support groups of YPLHIV

‘In Vietnam, mental health services [are] not popular, even in the general population. However, YKP have many mental problems, so those kinds of services are really necessary. In contrast, YKP needs to be informed about the importance of mental health.’

Regional survey respondent (Vietnam)

Accountability and transparency

Share and learn

It is important that government or quasi-governmental bodies be held to account for the rights that they are entrusted to respect, protect and fulfil. Accountability is a process by which YKP can ensure that their rights transition from words on paper into protections, services and information that positively impact on their health and well-being. Broadly, accountability initiatives are used to ensure that people do what they say they are going to do!

Social accountability uses the power of communities' voices to demand improvements in services; examples of such interventions is community monitoring of services by client groups or community scorecards. Legal accountability is the use of courts or legal procedures to hold the government to account for violations of rights that are articulated in a country's laws, policies or strategies. Budget accountability is the monitoring of government, donor or programmatic budgets to ensure that money is appropriately and adequately allocated and spent.

Built into any programme should be transparency, ensuring that YKP - the ultimate 'beneficiaries' - have access to information about how and where the money is being spent. This is not only crucial for a good partnership but, also, ensures that programmes achieve success.

Resources

- UNAIDS et.al (2014) *Making the money work for young people: a participation tool for the Global Fund to Fight AIDS, Tuberculosis and Malaria- for young activists and youth organisations.*
- UNAIDS et.al (2014) *Making the money work for young people: a participation tool for the Global Fund to Fight AIDS, Tuberculosis and Malaria- For Country Coordinating Mechanism members and other Global Fund actors.*
- Youth LEAD (2014) *Making the money work of young people: a facilitator toolkit for 3 days capacity development training*
- Youth LEAD (2017) *Global Fund toolkit to support the engagement of young people in the grant implementation of the Global Fund: a facilitator toolkit*
- Youth LEAD (2015) *Making the Money Work For Young Key Populations: Experiences of Young Key Populations with the New Funding Model in Indonesia*
- South Asia Human Rights Association (2018) *South Asia Human Rights Violations Report*

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves

- this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- What are the formal accountability mechanisms that exist in your country for holding the government and other actors to account for YKP's health and rights? How do they operate? How inclusive are they of YKP? Are there any accountability mechanisms for SRH or HIV-related rights specifically?
- What sort of training and know-how does your organisation have on social accountability? Is there a partner organisation who does?
- Have you worked with YKP to identify an issue for accountability programming (e.g. quality of services) and how you will hold actors to account?
- Have you made your own accounts and decision-making processes transparent to the YKP you are working with?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

All YKP

- Ensure that YKP have access to and know how to use existing complaints mechanisms when they have been denied their rights
- Start a hotline for YKP that allows them to call and report discrimination, violence or stigma, ensuring that there is a feedback mechanism to local government
- Develop YKP-led mechanisms for monitoring the government- and CSO-led services and CSE provided to young people in their communities
- Develop YKP-led feedback mechanisms to funding agencies

Experiences of YKP with the New Funding Model of the Global Fund in Indonesia

Fokus Muda (now referred to as Inti Muda)

Fokus Muda is the first national network of Young Key Populations in Indonesia initiated, as an informal group, in 2012. They did not have tangible plans or vision to engage in the Global Fund process but they wanted to ensure that they were, at least, able to participate in country dialogues. They were introduced to the Global Fund Youth-Guide in pre-youth events during the International AIDS Conference 2014 in Melbourne, Australia organized by the PACT and Youth LEAD. The Youth Guide entitled “Making the money work for young people: a participation tool for the Global Fund to fight AIDS, Tuberculosis and Malaria for young activists and youth organizations 2014 ” aimed to inform the young people on how they can engage and influence the Global Fund processes in countries. They found a tool to capacitate themselves through the guide and then they explored further to increase their engagement.

They reached out to all the existing civil society networks on HIV, government agencies and technical organizations expressing their interest to participate in any Global Fund related activities. In addition, they provided space to the members of the national key population networks and other stakeholder representatives in their preparatory trainings and meetings. This affirmative practice of engaging stakeholders in YKP events gradually created reliability towards Fokus Muda. Importantly, they also reached out to the CCM (Country Coordinating Mechanism) members who were representing the key populations and urged to prioritize the issues and needs of YKPs in the CCM meetings. The immense effort from these CCM members and supporting voices from other key population networks had a great impact in shaping the discussion priorities during the Global Fund processes of Indonesia in 2015. Fortunately, Fokus Muda was already part of the National Strategic Plan on HIV from 2015-2019- the plan which became the basis of the Global Fund national proposal.

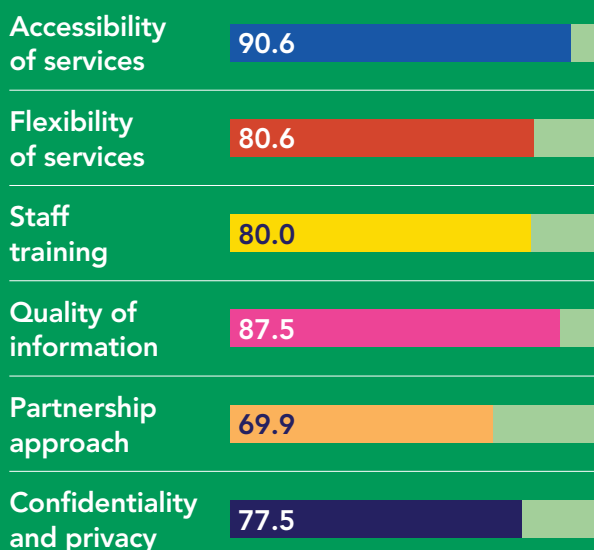
The team of Fokus Muda attended almost all the meetings, trainings, workshops, consultations related to the country dialogues. Consistency with the process was very important. By the time when the Global Fund proposal was submitted Fokus Muda was already recognized as one of the key players with HIV and their proposed programs of LOLIPOP was integrated into the proposal for the scale-up. In addition, the member of Fokus Muda was nominated as the alternate CCM member.

Monitoring YFS Availability

Association of People Living with HIV, Pakistan

The Association of People Living with HIV in Pakistan developed an assessment tool intended to review the quality and readiness of services for young people, from their own perspective. The tool included the following domains: administrative, geographic, economic, access, physical structure, variety of services, staffing, interpersonal relations, type of information provided, and how the information is provided. This has been a cross-sectional facility-based assessment, applying a structured questionnaire. Data were collected from 32 participants, involving clients, as well as service providers (health facility staff) from three different community-based organisations. A summary of the results is shown in the graph below.

Youth Friendly Service Delivery



Safety and security

Share and learn

Safety and security is a major concern for those working with and for YKP in some contexts, both in terms of the day-to-day safety of individuals as well as the overall sustainability of the organisations that promote their rights.

Programmes designed to promote the rights of YKP have the potential to raise awareness of their existence in the communities where they live, work and go to school. This heightened awareness may lead to increases in threats, violence and discrimination against YKP and their allies. Protections against such incidents should be built into any programme designed to promote YKP rights, including protection from public officials such as police officers; bullying and violence in school or work settings; and harassment by family and community members. Emergency response mechanisms should be in place for those who experience threats or violence, including relocation, safe-housing, legal defence and/or short-term financial support. Additionally, mental health services and support should be available to YKP to ensure their well-being in challenging contexts.

Organisations involved in YKP programming may experience raids or attacks and should have a policy detailing who to call for assistance; how to keep staff as safe as possible; what should be taken from the offices in the event of a raid; and who should speak on behalf of the organisations after the fact. Individuals within the organisations should have safety and security training, too, that prepares them in case of emergency. Another area of organisational security that is crucial to ensuring the safety of YKP and their allies is information security; details of members and their contact details should be maintained in a secure manner and only accessible by password at all times.

Resources

- [Advocates for Youth \(no date\) *Creating safe space for GLBTQ Youth: A toolkit*](#)
- [HIVOS \(2013\) *Responding to the safety and security needs of LGBTIQ communities and organisations: A situational analysis of Malawi, South Africa, Zambia and Zimbabwe*](#)
- [UNDP \(no date\) *Being LGBTI in Asia and the Pacific*](#)
- [Asia Pacific Forum of National Human Rights Institutes \(2016\) *Promoting and protecting human rights: Sexual Orientation, Gender Identity and Sex Characteristics*](#)
- [UNDP et al \(2015\) *The Right\(s\) Evidence – Sex Work, Violence and HIV in Asia: A MultiCountry Qualitative Study*](#)
- [Guide for LGBTQ to staying safe online](#)
- [International HIV/AIDS Alliance et al. \(2018\) *Safety and Security Toolkit: Strengthening the Implementation of HIV Programs for and with Key Populations*](#)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Does your organisation have a policy or protocol in place that addresses the risks and threats to YKP as well as your organisation?
- How have you done an analysis of the legal and socio-cultural threats and risks to YKP and working with YKP?
- Do you have allies in the law enforcement agencies and/or legal aid agencies who will help you in case of emergencies?
- Have you identified hospitals or health care providers who will respond to an emergency in case of YKPs under physical attack?
- What links do you have with other rights movements/organisations to build solidarity and garner support?
- Is there a network of individuals and/or organisations working on rights that you can join?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

All YKP

- Ensure that all organisations involved in the programme have a tailored security policy that includes protocols for information security and emergency response mechanisms
- Train all staff on the security policy on a regular basis
- Ensure that a legal defence team is in place should an individual or organisation be the target of violence or threats
- Sensitize the police on YKP and the security threats that they face
- Document instances of threats, discrimination or violence against YKP and their allies
- Ensure the availability of high-quality mental health services for YKP, including suicide prevention
- Create safe spaces where YKP can congregate and socialize without the fear of violence
- Work with national human rights institutions to monitor incidences of violence against YKP
- Advocate for laws and practices that end impunity of those who commit violence against YKP

Empowerment

Share and learn

Building capacity should form an integral part of any YKP programme. Rather than seeing youth empowerment and capacity-building as a 'by-product' of a programme, it should be seen as one of its core objectives. **By the end of a programme, YKP and their organisations should be stronger in every way, the goal being that when another programme begins, YKP can take on even more leadership roles.** Programmes and funding come and go, but YKP can be empowered to play leadership roles in their communities beyond the life of programmatic interventions.

'Decision-makers do not include us in the planning level, they just decide by themselves.'

A young person who identifies as transgender and is living with HIV, Myanmar

YKP networks and organisations are vital lifelines for many young people who identify with a key population; it gives them a sense of belonging. Support for their continued existence is key to ensuring that YKP feels included and that their voices are heard. YKP-led organisations should be supported to participate in spaces that affect their health and well-being. Adult-led organisations can empower them to participate in these spaces through financial and training support but, also, can lead by example amongst adult-led organisations by inviting YKP-led organisations to participate in traditionally adult-dominated spaces.

Resources

- [NewGen and TeenGen leadership courses](#) - contact Youth LEAD for more information
- [Youth LEAD \(no date\) Taking Root, Branching Out: The development of young key population-led organizations in the Asia-Pacific region](#)
- [Youth LEAD \(no date\) Voices of Change](#)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- How have you worked with YKP-led organisations to determine the support that they need and want?

- What are the capacity building and financial needs of the YKP organisations involved in the programme by discussing with them and developed a plan?
- What is your plan for building the capacity of individual YKP as well as the organisations they represent through your programme?
- How can you ensure that, through the programme, YKP-led organisations end up more capacitated and more financially stable than at the beginning of the programme?
- Have you partnered with YKP organisations from the conception stage of the programme?
- Have you built in financial support for YKP-led organisations through the programme to ensure their sustainability?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

Support for the start-up of YKP network

Myanmar

In late 2012, a leadership short course in Yangon brought together for the first time young key affected populations from across Myanmar. One of the workshop's results was the establishment of a working group designed to strengthen YKP in Myanmar; from there, nine active young people formed Myanmar Youth Stars. Thereafter, Youth LEAD with support from UNESCO organized a NewGen training in Myanmar, which is a leadership short course for young people from key populations (YKP). After this workshop, Myanmar Youth Stars' (MYS) core members initiated a network. Formally organized in April 2013, MYS aims to effectively respond to the inequality, stigma and discrimination towards marginalized young people in Myanmar and who are at a higher risk of HIV infection. They create awareness on HIV and AIDS and safe sex and create opportunities for young key affected population for empowerment. MYS' members equally represent young males who

have sex with males (MSM), transgender, people who inject drugs (PWID), male and female sex workers, and people living with HIV (PLHIV). MYS has had the support not only of UNESCO but of other regional agencies, such as APCOM.⁴¹

Youth consultation on National AIDS Strategy

Fokus Muda, Indonesia

Fokus Muda promotes the participation of YKP. To develop an advocacy toolkit, the programme brought together YKP from different communities for a consultation. Participants were encouraged to identify the issues of greatest concern for them. For young people who inject drugs, the issues identified were the lack of specific programmes for them countrywide and of relevant harm-reduction programming. Outcomes and recommendations from the consultations were fed back to the participants and to other stakeholders, and formed part of the data used in advocacy about the government's 2015-2019 National Strategic Plan on AIDS.⁴²

41 APCOM (2013) *Spotlight: Myanmar Youth Stars, Yangon*

42 WHO et al (2015) *HIV and young people who inject drugs: A technical brief*

Healthy youth-adult partnership

Right Here Right Now, Pakistan

The Right Here Right Now programme is a five-year global strategic partnership that is active in ten countries (Kenya, Senegal, Uganda and Zimbabwe; Bangladesh, Indonesia, Nepal and Pakistan; Bolivia and Honduras), and the Caribbean sub-region. The programme undertakes concerted advocacy for a progressive and inclusive SRHR agenda and holds governments accountable for the implementation of comprehensive sexuality education and youth-friendly SRH services, including safe abortion. In each country, there is a platform of several different organisations that come together to advocate on SRHR. Each platform has a National Coordinator who is responsible for coordinating the efforts of all the organisations. The programme intentionally hired Coordinators under the age of 30 as the programme is youth-focused.

The youth-adult partnership between the Coordinator and the mix of youth-led and 'adult' organisations in the platforms varies in strength. The Pakistan platform had a Coordinator who was able to work well with the adults in the Steering Committee (the main decision-making body of the platform). This was because the adults appreciated the need for the advocacy platform to have a young face at the forefront to emphasise to policy makers that young people could take charge of their own needs and rights. They supported the Coordinator and guided him when required. The Coordinator had been involved in SRHR programmes from before and was familiar with some of the adults, therefore knew how to work with them and present his suggestions in a way that they were taken seriously. The value of building a rapport between people is important in building a healthy youth-adult partnership.

NewGen is not simply a one-off training but, rather, a movement to empower YKPs throughout the Asia Pacific region. It has fostered an environment of support, by which

YKPs can organize themselves for advocacy. It is a hallmark of a participatory approach, given that the course was designed with leadership and direction from YKPs, who was involved as authors and facilitators.⁴³

NewGen (New Generation Leadership Training manual)

Youth LEAD

A regional consultation of YKP in January 2011 highlighted and emphasized low capacity and few opportunities for YKP's to advocate for change and influence the HIV response. In response, the 5-day interactive course was developed by Youth LEAD, with support from Asia-Pacific Interagency Task Team for YKP. Youth LEAD drew on academic experts in health education, participatory training methodologies, young training experts, YKPs and UN partners to develop a comprehensive and engaging course.

The first ToT (training of the trainers) for the NewGen course was completed in September 2012 for YKP leaders from Indonesia, Myanmar, Sri Lanka and the Philippines. Subsequently, the training was rolled out in all of the participating countries in the same year. Fokus Muda and Myanmar Youth Star were initiated as organisations as the result of NewGen. The NewGen manual was adopted by the Indonesia National AIDS Council as the national leadership manual for YKP, followed by various roll outs for all KP. The individual rollouts for young people who inject drugs, sex workers, MSM and TG took place in 2013.

With successful roll outs, the manual was revised to incorporate the feedback from participants, and two components on Sexual Reproductive Health and Strategic Information were added. The second ToT took place with the revised manual in November 2013 for YKP leaders from Bangladesh, Brunei, Darussalam, Cambodia, China, Fiji, Nepal and Thailand. The roll outs took place in all the ToT participating countries except Fiji.

43 Note that the Pakistan platform was active till 2018. It is no longer functioning now due to political reasons.

All YKP

- Conduct a skills audit of YKP-led organisations to highlight strengths and weaknesses, and how they feel they can best contribute to an effective response
- Build up the capacity of YKP-led organisations to advocate for their rights to be respected in law, including in relation to access to services
- Create safe spaces for YKP groups and networks to meet
- Provide opportunities for YKP to feed into national consultations on policy and strategy
- Run trainings for YKP-led organisations according to their own identified needs, ensuring that technical as well as organisational capacities are addressed
- Develop mentorship programmes for YKP to learn 'on the job' from adults who have been working in the sector for a long time
- Provide training and support for individuals who are representing their communities in adult-dominated spaces (e.g. government committees, conferences)
- Assist YKP-led organisations or networks develop an online platform or presence
- Provide core funding for YKP-led organisations to help them get started

International norm-setting

Share and learn

In international human rights bodies at the regional and global levels, diplomats negotiate issues and develop norms on many issues that concern YKP, such as gender identity, sexual orientation, access to SRH services, comprehensive sexuality education and drug use - to name a few. Although these areas are often far from home, they can have a significant impact on human rights in the national context.

There are a couple of important ways that YKP can - and should - be involved in international norm-setting. The first is by attending sessions held by international human rights bodies to have their voices heard and their positions on important issues brought to the attention of diplomats. Before, during and after these negotiations, civil society representatives - including young people -

are often able to speak to diplomats and advocate for their issues. However, significant training, support and mentorship are needed for young people who attend these negotiations for the first time. Another way that YKP can get involved is by using international norms to put pressure on national lawmakers. Often, national legislators are not aware of international norms or their country's obligations under international human rights conventions. Bringing these obligations to the attention of lawmakers, as well as the ways in which international bodies are interpreting them, has the potential to bolster advocacy efforts

Resources

- [Right Here, Right Now Bangladesh \(2018\) Submission to the Universal Periodic Review](#)
- [Sexual Rights Initiative, IPPF \(2012\) Sexual Rights and the Universal Periodic Review: A toolkit for advocates](#)
- [Sexual Rights Initiative \(no date\) UPR Database](#)
- [Youth LEAD \(2019\) Legal Advocacy Toolkit](#)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- How do international human rights norms affect your work? If you don't know, who can you ask to advise you on this?
- Have you determined the status of regional and international human rights agreements in your country?
- Have you identified when your country is up to review in front of international human rights bodies, such as the Human Rights Council or the Committee on the Rights of the Child?
- Do you know how your government is kept to account domestically for the regional and international agreements it has signed on to?

- Have you partnered with other organisations or advocates who have experience in international human rights settings?
- Is there an existing training manual you could use for trainings on international/regional human rights?
- How are YKP involved in accountability efforts for international human rights and norm-setting in global forums?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations

and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

All YKP

- Support the training, mentorship and participation of YKP in regional and global norm-setting processes, such as the Universal Periodic Review
- Conduct training amongst YKP-led organisations of the ways in which international norms can bolster their national-level advocacy

Using the UPR to hold governments to account for young people

Right Here, Right Now Coalition, Bangladesh

Bangladesh's human rights record was reviewed by the Human Rights Council's 30th session of the Universal Periodic Review (UPR) in May 2018. During such sessions, other countries make recommendations to Bangladesh on how to improve the respect, protection and fulfilment of human rights. Bangladesh's representatives to the UPR can reject or accept the recommendations. Amongst the recommendations accepted by Bangladesh were: 1) a recommendation from Belgium to 'put an end to the practices of early marriages and the payment of dowries by implementing laws prohibiting such practices' and 2) a recommendation from Uruguay to

'continue increasing efforts to combat all types of violence against women and girls, and eradicate discriminatory practices and measures against them, guaranteeing the full exercise of their rights, including those related to sexual and reproductive health.' Advocates at the national level can use these accepted recommendations to hold their government to account.

Young people from Bangladesh also got involved in the May 2018 UPR. The Sexual Rights Initiative (SRI) collaborated with Bangladesh's Right Here, Right Now (RHRN) platform, which includes several youth-led organisations, to develop a submission to the Universal Periodic Review highlighting areas of rights violations. The submission focused on three key areas of violations against young people in Bangladesh: 1) the absence of comprehensive sexuality education in their schooling; 2) the lack of access to SRH services, including safe menstrual regulation that caters specifically to young people; and 3) the lack of inclusive national policies on SRHR for people with diverse sexual orientations and gender identities.⁴⁴

44 Right Here, Right Now Bangladesh (2018) *Submission to the Universal Periodic Review*



PROGRAMMING

5



MONITOR, EVALUATE & RESEARCH

Share and learn

What gets measured, gets done. At the heart of this well-known saying is the truth that data have the capacity to make visible previously-invisible issues and populations. No group recognizes this more than YKP in the Asia Pacific who, time and time again, call for more and better data and research on their realities.

In 2011, just one-third of the HIV surveillance systems in the region included people aged below 17 years and, even where adolescents were included, the data samples were too small to be representative. What's more, fewer than half of the countries in the Asia Pacific region reported on key indicators for key populations under the age of 25.⁴⁵ According to UNICEF and partners, some of the reasons why adolescents are missing from country data sets are:

- Surveys and research usually do not include criteria for the 10-14 age group; some surveys have managed to collect data from participants as young as 15 years, but data

are not disaggregated by age and sex, and the sample sizes comprising 15 to 19-year-olds are often not sufficient for meaningful analysis

- Conservative attitudes and the belief in some countries that inclusion of adolescents is not possible simply because it has never been done
- Worries about ethical clearance, particularly for adolescents under 18, to participate in research studies, due to consent issues in relation to minors
- Young key populations often do not go to programme sites used to gather behavioural surveillance data
- Widespread criminalization of risk behaviours makes it difficult to include them in mapping and research
- Adolescents selling sex and street children at higher risk of HIV exposure are often hidden, difficult to reach and potentially unwilling to participate in research
- Adolescents who sell sex may lie about their age to avoid detection (and to be allowed access to sexual and reproductive health services).⁴⁶

⁴⁵ UNICEF et al (2015) *Adolescents Under the Radar*, p 52.

⁴⁶ UNICEF et al (2015) *Adolescents Under the Radar*, p 52.

‘In Vietnam, decision-makers collect information through healthcare system or other government systems, which sometimes is not updated regularly. They do not pay attention to data from YKP organizations and do not consider those data as a reference when they build a law. In contrast, donor agencies and implementing agencies that manage programmes for YKP understand more about the realities of YKP because they connect with community-based organizations, and they visit those offices to share and receive information quarterly.’

Regional survey respondent, Vietnam

Resources

- [RUNICEF et al \(2013\) *Young Key Populations at Higher Risk of HIV in Asia and the Pacific: Making the case with strategic information*](#)
- [UNICEF \(2015\) *Understanding key terms and data related to HIV*](#)
- [Johnston, L G, Sass, J, Acaba J, Cheng W-S, Prabhu S M \(2017\) *Ensuring Inclusion of Adolescent Key Populations at Higher Risk of HIV Exposure: Recommendations for Conducting Biological Behavioral Surveillance Surveys*, JMIR Public Health Surveill, vol 3, issue 2](#)
- [Rutgers and IPPF \(2013\) *Explore: Toolkit for involving young people as researchers in sexual and reproductive health programmes*](#)
- [Options UK \(no date\) *PEER resources*](#)
- [UNAIDS YKP Data Hub](#)
- [Rutgers \(no date\) *Photovoice Facilitator's Guide, Manual and Fact sheet*](#)

Reflect and question

The following questions can be used to spark conversation. There are many other questions that organisations can and should ask themselves - this is merely a starting point. The purpose is not to criticise and apportion blame but, rather, to commit to continual questioning of the status quo. In general, programmers should be asking themselves: are things the way they are for a reason? And, importantly, is that reason still valid?

- Why is monitoring important for programmes? Why is evaluation important for programmes?
- What are the benefits of adding in an original research component to your programme?
- Who decides what gets measured by a programme? How does this impact programmes for YKP?
- What question do you wish you had answered before beginning your programme? How can you integrate these into the M&E&R plan to make sure that next time you design a programme you have the answers you need?
- How will you use any data - qualitative or quantitative - once you have it?
- How will you work with YKP to conduct monitoring, evaluation and research?
- What training will your team and YKP need in order to conduct M&E? Research?
- Who will you need to partner with in order to ensure that you have a solid M&E and research plan?

Inspire and improve

There are many examples from around the region of how YKP-led and YKP-serving organisations and movements are advancing the health and rights of YKP. These are just a few of those ideas, to inspire change and improve programming across the region.

U-Report (extracted from Adolescents Under the Radar (2015))

UNICEF is putting its new youth-empowerment tool, U-Report, to work to help achieve the All In targets. U-Report is an SMS and Twitter-enabled tool designed specifically to allow young people to contribute their voices – and information – to issues they care about. It uses RapidPro, UNICEF’s open-source software platform for international development.

Indonesia is one of the 12 priority countries worldwide where U-Report has been introduced. Plans are in the pipeline to launch it in Pakistan and Bangladesh. Young people are targeted to join U-Report through local NGOs, youth organizations and faith-based organizations. Traditional media campaigns are also used to advertise the service and encourage young people to sign up. By sending the text message, ‘join,’ to a toll-free number and answering a few registration questions (e.g. age, gender, region within a country in which they reside), any young person with a mobile phone can become a volunteer ‘U-reporter’ in their country. Through its ability to connect with young people, U-Report can address data gaps among adolescents (disaggregated by age and sex), and engage with different populations at high risk (adolescents living with HIV and young key population groups) using targeted messaging.

Peer Ethnographic Evaluation and Research (PEER)

Participatory Ethnographic Evaluation and Research (PEER) is an innovative approach to qualitative research and human-centred design. It was developed by Options experts, in collaboration with Swansea University. Members of a community (PEER researchers) are trained to carry out in-depth conversational interviews with friends in their social networks. By working with established relationships of trust between friends, PEER generates rich insights into how people view their world, and how they make decisions on key issues. PEER is highly effective in generating insights into sensitive issues among hard to reach groups, where stigma and marginalisation make traditional research methods difficult to implement. The PEER process enables programmes to engage communities in discussions and ensures that the views of marginalised and disadvantaged groups can be heard.

One example of a PEER research brief can be found here, which focuses in on the lives of sex workers in Myanmar: https://options.co.uk/sites/default/files/living_on_the_edge_peer_research_brief_report.pdf

Strengthening data for adolescents at risk of HIV through the All IN – End Adolescent AIDS platform

Although we know which adolescent populations are at highest risk of HIV infection, we do not have a firm grasp on the HIV prevalence of these populations nor the extent of their risk behaviours or their whereabouts. Every country in the Asia Pacific region collects routine HIV sentinel surveillance data, with most countries including criteria for people aged 15-19. In practice, however, data for those under 18 are often hard to obtain because of ethical and parental consent issues. Where there is data on 15 - 19-year-olds, they tend to be aggregated into an under 25 or 15+ age cohort and rarely analyzed as a distinct group. The scarcity of intelligence on adolescents has contributed to their absence from policies and programmes designed for youth in general. This is particularly the case for young transgender women, who are often categorized as MSM. Accurate, disaggregated data are needed for focused, comprehensive programming for adolescents.

UNICEF, together with UNAIDS and partners, launched the All In! to #EndAdolescentAIDS, a platform for action and collaboration to inspire a social movement to drive better results with and for adolescents through critical changes in programmes and policy. One of the four key areas of the All In is to sharpen adolescent-specific elements of national AIDS programmes by improving data collection and analysis and use to drive programming and results.

To close the data gap, UNICEF collaborated with government partners in China, Indonesia, Philippines and Thailand to review existing data on adolescents at risk and to define priority populations, interventions, and geographic settings to accelerate HIV-specific outcomes for adolescents. In Indonesia, Philippines and Thailand, secondary data analysis of the available data for 15 – 24 years in the latest Integrated Biobehavioural Surveillance (IHBBS/IBBS) were undertaken for key indicators related to risk behaviours, comprehensive knowledge, availability, access and utilization of HIV services. Given the lack of age disaggregated

data, the analysis included disaggregation of data into 15 – 19 years and 20 – 24 years to understand specific risks and vulnerabilities for adolescents in these age groups. Key findings were consolidated and presented as an overview of the situation on adolescents and HIV in the three countries. Recommendations on scaling up high-impact interventions (condom use, harm reduction, testing and counselling and antiretroviral treatment) as part of a comprehensive health package for adolescents at risk of HIV were highlighted. In addition, a summary of existing adolescent data gaps was identified for each country. Further to the development of the situational overviews, follow up actions have been taken by each of the countries to strengthen data for adolescents most at risk of HIV.

Sample indicators from UNAIDS YKP data hub

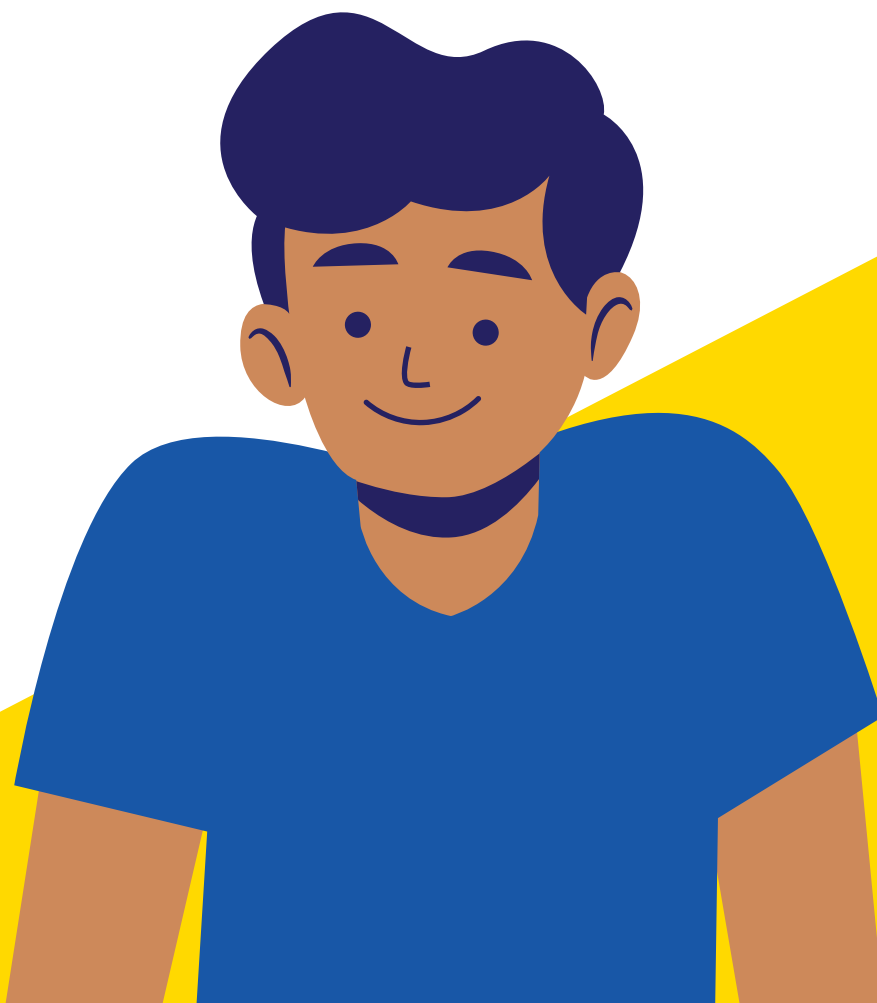
Asia Pacific region

Some of these indicators are taken from the hub verbatim and are already collected in countries across the region. Others are collected for adult key population groups but not for youth, so have been edited here to indicate how they might read for YKP. This list is by no means exhaustive!

- Proportion of government spending on HIV prevention, by YKP group
- Needles and syringes distributed per YPWID
- Coverage of opioid substitution therapy amongst YPWID
- HIV prevalence amongst young key population groups
- Proportion of young MSM/young sex workers who report using a condom at last anal sex
- Proportion of young MSM/transgender young people who sold sex to men
- Proportion of (YKP group) experience physical or sexual violence in last 12 months
- Proportion of (YKP group) with comprehensive knowledge of HIV
- HIV testing coverage amongst (YKP group)
- Criminalisation of same-sex sexual activity between consenting young people
- Proportion of young male/female sex workers who inject drugs
- (YKP group) who report experiencing stigma or discrimination in the last 12 months

Monitoring and evaluation ideas:

- Build YKP capacity in various research methodologies that can be utilised within the context of a programme.
- Forge partnerships between YKP-led organisations and research institutions (e.g. universities) to develop research plans.
- Create a national 'hub' for YKP data that is accessible for all those working with and for YKP
- Create unique, audience-specific communication products (e.g. fact sheets, briefs) with YKP data for various stakeholders
- Budget for YKP-led community-based monitoring of programmes, including the friendliness of SRH and HIV services
- Establish a national YKP advisory board within the MoH or national AIDS commission that can advise on the data gaps and how to collect the missing data
- Ensure that all M&E and research plans are developed together with YKP, including the identification of indicators for reporting against programme objectives
- Pilot the use of online social media platforms used by YKP to collect data



ANNEX 1

YKP terminology in other languages

Country	People who sell sex		People who use drugs	
	Appropriate Words	Inappropriate Words	Appropriate Words	Inappropriate Words
India (Hindi)		<ul style="list-style-type: none"> • वेश्या (Veshya) • रन्दी (Randi) • बाज़ारू औरत (Bazaru Aurat) • माल (Maal) 		<ul style="list-style-type: none"> • नशेडी (Nashedi) • चरसी (Charsi)
Indonesia (Bahasa)	<ul style="list-style-type: none"> • Pekerja-Seks 	<ul style="list-style-type: none"> • Pekerja-Seks • Komersial • Lonte • Pelacur • Cabol • Ayam Kampus 	<ul style="list-style-type: none"> • Pengguna-Napza 	<ul style="list-style-type: none"> • Pemadat • Junkie • Pecandu
Mongolia	<ul style="list-style-type: none"> • бэлгийн хөдөлмөр эрхлэгч (Belgiin Hudulmurerhlegch) 	<ul style="list-style-type: none"> • Янхан (Yan-han) • Бие үнэлэгч- (Bie unelegch) • Бүүвээ (Buuvee) 		<ul style="list-style-type: none"> • хар тамхичин (Har-tamhichin)
Nepal (Nepali)		<ul style="list-style-type: none"> • वेश्या (Veshya) • रन्दी (Randi) • माल (Maal) • छममा (Chamma) 		<ul style="list-style-type: none"> • त्यापे (Tyape) • गजेदी (Gajadi)
Philippines (Tagalog)	<ul style="list-style-type: none"> • Callboy • Sebis • Sex-worker 	<ul style="list-style-type: none"> • Pokpok Prosti 		<ul style="list-style-type: none"> • Adik

MSM		Transgender	
Appropriate Words	Inappropriate Words	Appropriate Words	Inappropriate Words
	<ul style="list-style-type: none"> • गान्दु (Gandu) • मअमु (Mamu) • चाका (Chakka) • हनिज्रा (Hijra/Hinjra) • गान्द (Gaand) • गअन्द मअरु गुद (Gaand-Maru-Gud) 	<ul style="list-style-type: none"> • हनिज्रा (Hijra) • कनिन्नर (Kinnar) 	<ul style="list-style-type: none"> • हनिज्रा (Hijra) • चाका (Chakka) • वेश्या (Veshya)
<ul style="list-style-type: none"> • Gay • Laki-Seks Laki 	<ul style="list-style-type: none"> • Homo • Banci • Bencong • LGBT • Kucing 	<ul style="list-style-type: none"> • Waria 	<ul style="list-style-type: none"> • Banci • Bencong • Wadam
<ul style="list-style-type: none"> • Гей (Gay) • Анги (Angi) 	<ul style="list-style-type: none"> • Гомо (Gomo) • Гаж (Gaj) 		<ul style="list-style-type: none"> • Манин (Manin) • Гаж (Gaj)
<ul style="list-style-type: none"> • सम लङ्गि पुरुष (Sama lingi purush) 		<ul style="list-style-type: none"> • तेश्रो लङ्गि (Teshro Lingi) 	<ul style="list-style-type: none"> • हजिदा (Hijada) • छका (Chakka)
<ul style="list-style-type: none"> • Bi • Silahis 	<ul style="list-style-type: none"> • Bakla • Bantut • Bading • Bayot-agi 	<ul style="list-style-type: none"> • Trans 	<ul style="list-style-type: none"> • Bakla • Parlorista

Country	People who sell sex		People who use drugs	
	Appropriate Words	Inappropriate Words	Appropriate Words	Inappropriate Words
Taiwan (Mandarin)	<ul style="list-style-type: none"> 性工作者 (Xing Gong Zuo Zhe) 	<ul style="list-style-type: none"> 雞 (Ji) 妓女 (Ji Nu) 站壁 (Zhan Bi) 傳播妹 (Chuan Bo Mei) 應召女郎 (Ying Zhao Nu Lang) 鴨子 (Ya Zi) 牛郎 (Niu Lang) 賣淫 (Mai Yin) 	<ul style="list-style-type: none"> 用藥者 (Yong Yao Zhe) 	<ul style="list-style-type: none"> 吸毒 (Xi Du) 毒蟲 (Du Chong)
Thailand	<ul style="list-style-type: none"> คนขายบริการทางเพศ (Khon Khai Breegan Tarng Phet) 	<ul style="list-style-type: none"> สำส่อน (Sam Son) เอด (Raad) เอดตามซอย (Raad Tharm Soi) กะหรี่ (Kharee) 	<ul style="list-style-type: none"> คนที่ใช้ยา (Khon Tee Chai Yaa) 	<ul style="list-style-type: none"> ซี้ยา (Kee Ya) คนติดยา (Khon Tid Ya)
Viet Nam	<ul style="list-style-type: none"> Người lao động tình dục (Nguoee lao dong tin duk) 	<ul style="list-style-type: none"> Đĩ, (Dee) Gái bao (Gai bao) Trai bao (Chai bao) đĩ đực (Dee duke) Cave Phò (Ca Ve Pho) Điểm (Diem) Gái bán hoa (Guy ban hoa) Gái làng chơi (Guy lang chôi) 	<ul style="list-style-type: none"> Người sử dụng ma túy (Nguoee su dzung ma tree) 	<ul style="list-style-type: none"> Nghiện (Ngeen) Ngáo (Ngao) Sida (Seeda) Hút chích (Hut cheek)

MSM		Transgender	
Appropriate Words	Inappropriate Words	Appropriate Words	Inappropriate Words
<ul style="list-style-type: none"> 同志 (Tong Zhi) 同性戀 (Tong Xing Lian) 男同志 (Nan Tong Zhi) 男同性戀 (Nan Tong Xing Lian) 	<ul style="list-style-type: none"> 娘炮 (Niang Pao) 娘娘腔 (Niang Niang Qiang) 	<ul style="list-style-type: none"> 跨性別 (Kua Xing Bie) 跨 (Kua) 第三性 (Di San Xing) 	<ul style="list-style-type: none"> 人妖 (Ren Yao)
<ul style="list-style-type: none"> เกย์ (Gay) ชายรักชาย (Chai-rak-chai) 	<ul style="list-style-type: none"> ตุ๊ด (Dtood) คิง (King) ซอว์ (Saawng) แด่ว (Dtaaeo) เซตเล็ก (Saeht Lek) เล้กท่อน (Lek Thawn) อีแอบ (Ee Aaep) แอบจิด (Aaep Jit) ผู้ซิง (Poo Ching) 	<ul style="list-style-type: none"> กะเทย (Kathoey) คนข้ามเพศ (Khon Kham-Phet) 	<ul style="list-style-type: none"> กะเทย (Kathoey) ผู้ซิง (Poo Ching) Lady-boy
<ul style="list-style-type: none"> Người đồng tính nam (Nguoee dong tin nam) Gay 	<ul style="list-style-type: none"> Bóng (Bong) Bê dê (Bee Dee) Xăng pha nhót (Xang fa yot) Ái nam ái nữ (ai nam ai nu) Nửa nạc nửa mỡ (nuo nak nuo mo) Lại cái (lai kai) 	<ul style="list-style-type: none"> Người chuyển giới (Nguoee chuein zoi) TG 	<ul style="list-style-type: none"> Bóng lộ (Bong Lo) Cú có gai (Cuu Co Gai) Bê dê Thái (Bee Dee Thai)

ANNEX 2

YKP-led and YKP-serving organisations in Asia Pacific

Name	Website
Youth LEAD, Asia Pacific Regional Network (Bangkok, Thailand)	https://youth-lead.org/ https://www.facebook.com/YouthLEADAP/
Youth RISE (Global)	https://youthrise.org/
Fokus Muda (Indonesia)	https://fokusmuda.weebly.com/
Youth Voices Count (Bangkok, Thailand)	http://youthvoicescount.org/ https://www.facebook.com/youthvoicescount/
Lighthouse (Viet Nam)	https://www.facebook.com/lighthousesocialenterprise/
Vietnam Network of YKP	https://www.facebook.com/VNYKP/
YKP Lead Nepal	https://www.facebook.com/YKPLEADNepal/
Youth LEAD Mongolia	https://www.facebook.com/youthleadmng/
Young Out Here (Sri Lanka)	https://www.facebook.com/youngouthere/
Human Touch Foundation (India)	https://www.facebook.com/HumanTouchGoa/
Cebu Plus (Philippines)	https://www.facebook.com/CebuPlusAssociationInc/
Association of People Living with HIV (Pakistan)	http://theaplhiv.org.pk/
Myanmar Youth Star	https://www.facebook.com/MyanmarYouthStars/
Y-PEER Asia Pacific Centre	https://ypeerap.org/ https://www.facebook.com/YPEER.Network/
Y-PEER Bhutan	https://ypeerbhutan.org/ https://www.facebook.com/ypeer.bhutan/
Y-PEER Nepal	www.ypeernepal.org https://www.facebook.com/ypeernepal/
Y-PEER Vietnam	https://www.facebook.com/ypeervietnam/
Y-PEER Laos	https://www.facebook.com/YPEERLaos/
Y+ Network (Global)	http://www.yplusnetwork.org/ https://www.facebook.com/YplusNetwork/
TNY+ (Thailand) - Youth Chapter of TNP+	https://www.facebook.com/TNPplus/
Love Yourself (Philippines)	http://www.loveyourself.ph/
Youth LEAD India	Email: gautamhst@gmail.com
Vectoring (China)	Email: liuxueync@gmail.com

ANNEX 3

Case Study Template

Thank you for agreeing to write a case study about programming for young key populations (YKP) in your country. We intend to use the information you provide in a toolkit for implementing agencies, donors and non-governmental organisations.

Please answer the following questions as fully as possible. If you can, provide more information than is needed, rather than less.

1. What is the name of the implementing agency? (e.g. Ministry of Health or name of organisation)

2. What is/was the name of the programme or project? (e.g. 'Rights for All')

3. What were the dates during which the programme/project was implemented? (e.g. Aug 2010 - July 2015)

4. In what ways were young people involved in the programme/project? Please be specific, and if they were involved in many different ways please list all of them and give an explanation for each.

5. Which groups of young key populations was the programme/project trying to reach? (e.g. Young people who sell sex in urban Manila)

6. What were the main interventions used or services provided in the programme/project? Give a full description of each!

7. How did the programme/project measure its success? In other words, which monitoring or evaluation tools did it use?

8. What were the programme's/project's successes, results or outcomes? Please provide a full description of each!

9. Did the project ask YKPs whether they were happy with the programme or project? If so, what did YKP say?

ANNEX 4

Survey template

Introduction

This survey is designed for individual members and affiliates of Youth LEAD. The data from this survey will be used to inform a new toolkit specifically for young key populations in Asia-Pacific. Your opinions and perspectives are the foundation of this toolkit, and thus your participation in this survey is highly valued!

You do not have to participate - this is completely voluntary. Your name will not be associated with any of the findings published in the toolkit; rather, you will be identified by country, age and the YKP group with which you identify (if any).

This survey will take you between 25 and 45 minutes to fill in. At the end of this survey, you will be given the opportunity to indicate whether you want to help with the toolkit by contributing more of your experiences. If you do, there will be space to leave your contact details.

Thank you so much for participating!

Section 1: Your details

Country of origin	Organisational affiliation	How old are you?

Do you identify with any of the listed groups? (Select any and all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Lesbian | <input type="checkbox"/> Man who has sex with men |
| <input type="checkbox"/> Gay | <input type="checkbox"/> Woman who has sex with women |
| <input type="checkbox"/> Bisexual | <input type="checkbox"/> Sex worker |
| <input type="checkbox"/> Queer | <input type="checkbox"/> Drug user |
| <input type="checkbox"/> Trans young woman | <input type="checkbox"/> Young person living with HIV |
| <input type="checkbox"/> Trans young man | <input type="checkbox"/> Other, please specify |
| <input type="checkbox"/> Androgynous | |

Section 2: Your experiences

1. What is it like being a YKP in Asia Pacific? Please share any positive or negative personal stories or those of your community.

2. To what extent do you agree with the following statement: As a YKP living in Asia-Pacific, my rights are respected.

☐ Strongly agree ☐ Somewhat agree ☐ Neutral ☐ Somewhat disagree ☐ Strongly disagree

3. Please explain your answer to question 2.1, giving examples.

4. To what extent do you agree with the following statement: *Decision-makers in government understand the realities of YKP in my country.*

☐ Strongly agree ☐ Somewhat agree ☐ Neutral ☐ Somewhat disagree ☐ Strongly disagree

5. To what extent do you agree with the following statement: *Donor agencies understand the realities of YKP in my country.*

☐ Strongly agree ☐ Somewhat agree ☐ Neutral ☐ Somewhat disagree ☐ Strongly disagree

6. To what extent to you agree with the following statement: *Agencies that implement programmes for YKP in my country understand their realities.*

☐ Strongly agree ☐ Somewhat agree ☐ Neutral ☐ Somewhat disagree ☐ Strongly disagree

7. Please explain your answers to questions 2.4 - 2.6, providing examples.

8. To what extent to you agree with the following statement: *YKP have a voice in decision-making in my country.*

☐ Strongly agree ☐ Somewhat agree ☐ Neutral ☐ Somewhat disagree ☐ Strongly disagree

9. Please explain your answer to 2.8, providing examples.

Section 3: YKP programming

1. To what extent do you agree with the following statement: *There is little or no programming specifically for YKP in my country.*

☐ Strongly agree ☐ Somewhat agree ☐ Neutral ☐ Somewhat disagree ☐ Strongly disagree

2. To what extent do you agree with the following statement: *YKP are leading programmes for YKP in my country.*

☐ Strongly agree ☐ Somewhat agree ☐ Neutral ☐ Somewhat disagree ☐ Strongly disagree

3. If programmes do exist for YKP in your country what, in your opinion, is missing? *(Select any and all that apply)*

- | | |
|---|---|
| <input type="checkbox"/> Monitoring, evaluation and research | <input type="checkbox"/> Mental health services |
| <input type="checkbox"/> HIV prevention and testing | <input type="checkbox"/> Drug treatment |
| <input type="checkbox"/> Sexual and reproductive health information | <input type="checkbox"/> Hormonal therapy |
| <input type="checkbox"/> Comprehensive sexuality education | <input type="checkbox"/> Other, please specify |
| <input type="checkbox"/> Pre-exposure prophylaxis (PrEP) | |
-

4. What, specifically, is missing from policies and laws for YKP?

5. What, specifically, is missing from HIV services (prevention, testing, counseling, treatment and/or care) for YKP?

6. What, specifically, is missing from sexual and reproductive health services for YKP?

7. What, specifically, is missing from mental health services for YKP?

8. What, specifically, is missing from information, education and communication for YKP?

9. What, specifically, is missing from community involvement (e.g. involvement of parents, religious leaders and others in the communities around YKP)?

10. What, specifically, is missing from violence and stigma prevention programming for YKP?

11. What, specifically, is missing from harm reduction services for YKP?

12. Is there anything else that's missing from programming that you have not yet mentioned?

Section 4: Toolkit development

1. Please list any toolkits that you use currently for your work and tell us why you like think. Include a hyperlink if possible.

2. If there were a toolkit specifically on programming for YKP in Asia-Pacific, who would you want to use it? *(Select all that apply)*

- | | |
|---|---|
| <input type="checkbox"/> Ministry of Health | <input type="checkbox"/> National non-governmental organisations (NGOs) |
| <input type="checkbox"/> Ministry of Education | <input type="checkbox"/> International NGOs |
| <input type="checkbox"/> Donor agencies (national) | <input type="checkbox"/> YKP-led organisations |
| <input type="checkbox"/> Donor agencies (international) | <input type="checkbox"/> Other, please specify |
| <input type="checkbox"/> Global Fund country coordinating mechanism | |
-

3. What type of information is most useful for the users of this future toolkit?

- ☐ Information on what it is like to be a YKP in Asia-Pacific
 - ☐ Best practices in programming and policy for YKP
 - ☐ Decision-making tool for designing programmes for YKP
 - ☐ Other, please specify
-

4. Do you have any best practices or programmes that you could contribute to the toolkit? If so, please leave your email address in this blank.

ANNEX 5

Consultation participants

Name	Country	June 2018 1 st Regional Implementation Toolkit Workshop	November 2018 2 nd Regional Implementation Toolkit Workshop
Participants			
Tan Fok Jun	Malaysia	✓	✓
Armindo Correia Belo	Timor Leste	✓	✓
Misael Hotman Napitupulu	Indonesia	✓	✓
Jesper Adrian G. Taqueban	Philippines	✓	✓
Chiu, Yi-Chi	Taiwan	✓	✓
Nguyen Thi Thu Trang	Vietnam	✓	
Ye Htet Aung	Myanmar	✓	
Wanni Arachchige Praneeth Sandeepa Perera	Sri Lanka	✓	✓
Robby Budiarto Lemena	Indonesia	✓	
Nopparuch Muenkaew	Thailand	✓	✓
Jacob	China	✓	
Xiu Liu	China	✓	✓
Rojal Maharjan	Nepal	✓	
Gyeltshen Tenzin (YPEER)	Bhutan	✓	
Lida Bounvilai (YPEER)	Laos	✓	✓
Enkh-Adiya Budsuren (YPEER)	Mongolia	✓	
Tsering Zangmo	Bhutan	✓	
Smita Limbu	Nepal	✓	
Lakey Tshering	Bhutan	✓	
Konono Tingaia (YPEER)	Kiribati	✓	

Name	Country	June 2018 1 st Regional Implementation Toolkit Workshop	November 2018 2 nd Regional Implementation Toolkit Workshop
Legee Tamir	Mongolia	✓	✓
Tatereti Baraiti (YPEER)	Kiribati	✓	
Bilal Amin	Pakistan	✓	✓
Mirza Ammad Baig	Pakistan	✓	✓
Chinmay Modi	India	✓	✓
Md. Atul Hasan	Bangladesh	✓	✓
Kyaw	Myanmar	✓	
Harold James Bravo	Philippines	✓	
Fura Gelzen Sherpa	Nepal		✓
Gautam Yadav	India	✓	✓
Kim Soo (Vu Tran Dung)	Vietnam	✓	✓
Min Thet Phyo San	Myanmar		✓
Emadh Mahmood Dawre	India		✓
Songuk Ju	Republic of Korea		✓
Yeshe Dema	Bhutan		✓
Irene Audrey Mailoa	Indonesia		✓
Constantino Bruno Pedro Sarmiento Magno Xiemens	Timor-Leste		✓
Pooja Kunwar	Nepal		✓
Thin Thin Oo	Myanmar		✓
Le Thi Thai Lien	Vietnam		✓
Dararat Raumsuk	Thailand		✓
Chanthorn Phorng	Cambodia		✓
Puresveran Burnee	Mongolia		✓

Name	Country	June 2018 1 st Regional Implementation Toolkit Workshop	November 2018 2 nd Regional Implementation Toolkit Workshop
Stakeholders			
Bir Bahadur Rawal	Nepal		✓
Afrian Nurhalina	Indonesia		✓
Aries Valeriano	Philippines	✓	
Erika Yague	Philippines	✓	
Justin Francis Bionat	Philippines		✓
Pham Nguyen Ha	Vietnam		✓
Yusuf Kusumo Nugroho	Indonesia		✓
Harry Prabowo	Indonesia	✓	
Jennifer Ho	Taiwan	✓	
Quentin Batreau	France	✓	
Jawying Lyster (Honey)	Thailand/United Kingdom	✓	✓
Jo Sauvarin	Australia	✓	
Yanting Lu	China		✓
Anand Chabungbam	India	✓	
Niluka Perera	Sri Lanka	✓	
Victor Andrean	Indonesia	✓	
Ishwor Maharjan	Nepal	✓	
Hunter Gray	United States of America	✓	
Noah Metheny	United States of America	✓	
Marli Gutierrez	United States of America	✓	
Isaac Yen-Hao Chu	Taiwan	✓	
Sharaf Boborakhimov	Tajikistan	✓	

Name	Country	June 2018 1 st Regional Implementation Toolkit Workshop	November 2018 2 nd Regional Implementation Toolkit Workshop
Facilitators			
Gaj Gurung	Nepal	✓	✓
Ikka Noviyanti	Indonesia	✓	✓
Eddy Rudram	Thailand/ United Kingdom	✓	✓
Sangeet Kayastha	Nepal	✓	✓
Emily Schepers	Canada	✓	
Adam Klink	United Kingdom	✓	
Micaela Corcoran	Canada	✓	
Nancy Zhang	China	✓	✓
Pim Temcharoen	Thailand	✓	
Kat Watson	United Kingdom/ United States of America	✓	
Doan Thanh Tung	Vietnam	✓	✓
Leo Villar	Philippines		✓

