Half of the world’s population today—over 3.5 billion people—is under 30, and mostly living in developing countries (EuroMonitor, 2012). These young people are major stakeholders in the world’s social, political and economic development. Lack of access to reproductive health (RH) supplies makes young people vulnerable to sexually transmitted infections (STIs) and unintended pregnancy.

When young people are denied clear, accurate information about sexual and reproductive health (SRH) and access to contraceptives, they may be ill-prepared for sex, and unable to protect themselves from unintended pregnancies. Young people face an additional risk since family planning is controversial because sex is involved. Without accurate information and quality services young people will not be able to determine their own destiny.

Young people’s beliefs and decisions about family planning are critical to their sexual and reproductive health and rights. Too often, young people face obstacles that limit their access to modern contraceptive methods of choice. Some of the largest barriers to contraceptive use include cultural norms about family planning, lack of financial resources, unavailability of stock, geographical barriers and the absence of political will to make this a priority. Young people’s unmet need for contraception is greater than among any other age group.

The following key messages have been formulated by the RHSC Youth Caucus. They can be used to advocate for political and financial support at national (local, in country) and international level for young people to acquire accurate information (and life skills) around sexual and (SRHR) and rights supporting them to access modern contraceptive methods of their choice.

**Key messages/asks**

1. Empower young people by giving them accurate, youth-friendly and age-appropriate information on SRH methods and how to find trusted health facilities, so they can make their own method choice.

2. Invest in technology solutions and innovative ways of sharing information to ensure young people, especially the very hard to reach, have full knowledge about sexuality, reproduction and contraceptives, and access the method of their choice.

3. Develop country youth strategies around SRH and/or strengthen existing youth SRHR policies to include robust language on access to a wide range of RH supplies for young people.
4. Advocate for the implementation of existing or new youth RH supplies policies supported by necessary funding.

5. Disseminate existing youth RH supplies-related policies to key stakeholders, including youth organizations, to ensure broader knowledge of the existence of these policies, ensure their implementation and use them as best practices for other countries.

6. Address myths and misconceptions around contraceptives and sexual pleasure arising from social norms, religious beliefs and cultural barriers (e.g. pressure to have early pregnancy after marriage, and misconceptions that contraception encourages extramarital sex/infidelity, or that IUDs impact future fertility, etc.).

7. Make available guidelines for all health providers and facilities to use when providing supplies to young people, including in specific situations such as humanitarian/relief settings.

8. Continue removing legal barriers that limit access (e.g. abortion restrictions, parental/spousal consent, etc.) and developing policies that strengthen access (e.g. youth-friendly service provision, Comprehensive Sexuality Education, etc.), but also dare to think innovatively about new approaches that lift the barriers for all young women and men.

9. Acknowledge that young people are best placed to identify barriers and solutions as well as roll out country-level work to increase access to supplies among their age group. They should therefore be engaged and participate at all levels including policy, planning and implementation. They can support the collection of data, supply delivery, advocacy, social monitoring, product development and tracking stockouts.

10. Invest in training, mentorship and leadership opportunities for young people and youth organizations that may include, among others, understanding of supplies data for advocacy, and how to conduct dialogues with decision makers.

11. Set standards or disseminate existing standards and organize trainings for manufacturers, pharmacists and service providers in country to help them better understand young people’s needs and provide more effective RH supply services and counseling tailored to youth.

12. Increase research to have better and more disaggregated data on young people’s access to RH supplies, include young people in the data collection process and invest in appropriate mechanisms to share and socialize this data.

13. Reach more young people by setting up confidential, affordable youth-friendly and youth-led health settings where they can access supplies, not only through the traditional youth-friendly corners but also via creative ‘new’ spaces that young people may be more likely to attend (schools, private sector facilities, pharmacies, mobile outreach, etc.)

14. Brand the products and tailor the marketing towards young people based on their needs in order to make the products more attractive to youth.

15. Integrate SRH services into the provision of primary healthcare services and universal health coverage (e.g. the integration of vaccine outreach and family planning counselling/supply of family planning methods to those young people that need them)

16. Make menstrual care products available and affordable for all girls and young women, to minimize health problems and absence from school or work.

17. Strengthen inter-sectoral (health, education, labor, etc.) collaboration to promote youth access to RH supplies

18. Build community support for youth access to RH supplies by engaging religious leaders, community leaders, parents, and teachers in dialogue and gathering their input into program planning.

**More information**

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