

PREPARING FOR A
LIFELONG JOURNEY

12
QUESTIONS
AND ANSWERS

ON SEXUAL AND
REPRODUCTIVE
HEALTH AND
RIGHTS



unicef 
for every child

PREPARING FOR A LIFELONG JOURNEY

We all go through massive changes at every stage of our development as human beings. As we move from one stage of our life to the next, our bodies, feelings, likes and dislikes change as we develop the attitudes and values that will guide our choices, relationships and behaviours. Our attitudes and values continue to change as we face challenges and opportunities in our life, such as migration, education, and our relationships with others.

Adolescence is a time in our lives when very particular changes take place. This is when we move from childhood to adulthood. As this happens, it is very important to be aware of – and to take care of – our sexual and reproductive health, because the decisions we make during this period will affect our health and well-being for the rest of our life.

This brochure was developed to respond to common questions that adolescents on the move might have about sexual and reproductive health and rights and will help us all to:

- **get informed** about important issues related to our sexual and reproductive health
- **reflect** on issues that any of us might encounter throughout our life
- **act** by taking important steps that will help us preserve and improve our sexual and reproductive health.

It will help us on our **lifelong journey** to know and understand ourselves, other people and society.

KNOW AND UNDERSTAND YOURSELF

By knowing our body, our own values, and our wishes, we can set our personal boundaries as well as recognize and respect the boundaries of others. A sexual boundary is how far we are willing to go sexually or physically and these boundaries differ from one person to another. Understanding our own boundaries and those of our partner(s) is particularly important for a sexual experience where everyone feels safe and taken care of.

1. AM I READY?



STAY INFORMED

There are many things to know when it comes to sex and sexuality. They include knowing our own body, thinking about our sexual orientation, figuring out if we are ready emotionally and physically, learning how to protect ourselves from sexually transmitted infections, being informed about contraceptives, understanding what consent is and what our rights and responsibilities are toward the person(s) we want to have sex with.

We should make our own decisions about our sexual behaviours: these decisions should come from **within ourselves**. We may need more time than someone else to decide what we want, when, with whom and if we really want to make it happen at all.

Our choices – and the choices made by other people about their sexual life – should be respected and not judged. For example, when it comes to having sex (or not) we choose the right circumstances, such as a comfortable and safe place, the right person and the right time.¹



REFLECT

As we travel on our lifelong journey, it is important to be aware that we have **rights** and **responsibilities**. If we share the journey with someone, it is helpful to know where, when and how far we want to go.

We need to ask ourselves: “Am I emotionally and physically ready for this? Do I really know enough about myself and my partner? Do I know enough and have the right information about sex?”

Even if it can seem uncomfortable, we can also consider talking with our parents, guardians or other adults we trust about sex and sexuality, as they can give advice and support.



ACT

Accurate information is the key to making informed choices. So, we always need to look for trustworthy information when learning about sex. For example, we need to be careful when we navigate the internet, or talk to other people, as they offer a wide range of information. We need to make sure that we find the information that is right for us! This brochure has some ideas about where to look. Sometimes, visiting a **doctor or another health specialist** might be necessary to give us accurate information before we can make a decision.

If you want to learn more about many sexual and reproductive health topics, you can find useful information on this reliable source:

- In Arabic, English, French and 10 other languages:²

<https://www.zanzu.de/en/>

- In Italian, visit the institutional website:

<https://www.salute.gov.it/portale/fertility/homeFertility.jsp>

2. HOW DOES MY BODY CHANGE THROUGHOUT LIFE?



STAY INFORMED

Sexual development³ is a lifelong process for everyone, as our bodies change constantly. Our body goes through lots of changes that happen slowly over time. We might have some signs of puberty at an early age, while other changes show up years later. Those changes can also be particularly challenging for some of us. We can get pimples, mostly on our faces but on our bodies too. The hair we have on our arms and legs may get thicker and darker; and we're likely to grow hair in new places: young men and women grow hair in their armpits and pubic area, while young men also grow hair on their face and chest. Stretch marks are common too, as a sign of our adult body taking shape. Physical changes, from body odours to growth spurts are just part of our puberty story. For boys, the penis and testicles get bigger; for girls, breasts develop and get bigger and their bodies may become more curvy.

These visible changes are often our first sign of what is happening because we can see them, such as the changes to our external genitals during puberty. However, there are also invisible changes, with puberty also changing our internal reproductive organs. And these changes are responsible for:

- **ovulation** in females, which is the part of the menstrual cycle when an egg is released from the ovary. When the egg is released, it may or may not be fertilized by sperm. If fertilized, the egg may 'travel' to the uterus and embed itself there to develop into a pregnancy.

- **spermatogenesis** in males (making millions of sperm all the time) and the production of semen, which can lead to pregnancy if it comes into contact with and fertilizes an egg.

Hormones are responsible for many biological processes in puberty in males and females and play a key role in the regulation of reproductive organs and sexual functions. Hormones trigger spermatogenesis, when the sperm in boys' testicles is first produced; and menarche, when a girl has her first period (usually between the ages of 9 and 15- it varies from one individual to another).⁴

FEMALE GENITAL MUTILATION⁵

As well as the visible and invisible changes that take place during puberty, this is also a time when the sexual life of girls and young women, in particular, comes under intense scrutiny.

In some communities around the world, this scrutiny can lead to harmful traditional practices, such as female genital mutilation (FGM). FGM refers to all procedures that involve the partial or total removal of the external female genitalia or other injuries to the female genital organs for non-medical reasons. These reasons are linked, primarily, to the perceived need to 'control' female sexuality. It is a deeply entrenched social and cultural norm in many places. It is estimated that around 200 million girls and women alive today have undergone some form of FGM.

The practice can cause short- and long-term health complications, including chronic pain, infections, increased risk of HIV transmission, anxiety and depression, birth complications, infertility and, in the worst cases, death. It is internationally recognized as an extreme violation of the rights of women and girls and is forbidden by law in Europe.

Myths and facts about female genital mutilation (FGM)⁶

FGM can improve fertility.

✘ False. There is no evidence that FGM improves fertility. In fact, the complications caused by FGM can have a negative impact on fertility.

If FGM is performed by a health-care professional, there is no risk of harm.

✘ False. FGM is a harmful practice and may lead to physical, mental and sexual health complications regardless of who performs it.

FGM does not harm relationships.

✘ False. Many women who have experienced FGM report adverse effects on sexual relations, which can have a negative impact on their relationship.

Men support FGM.

✘ False. In most countries where data exist, most boys and men think FGM should end.

Only girls who undergo FGM can enter womanhood and be considered respectable.

✘ False. Cultural norms are changing and there is growing acceptance of other rites of passage into womanhood that do not involve FGM.

FGM is a religious obligation.

✘ False. FGM is not supported in any major religious texts and many religious leaders believe that this tradition should end.



REFLECT

For most of us, many new things happen once puberty starts. Our bodies are unique, so puberty is different for each one of us as we all go through puberty at our own pace. No matter how we are feeling about all these changes to our bodies, we should remember that puberty is a normal part of growing up. It's really useful to understand what is happening in our body when these changes affect us for the first time so that we can feel confident that these are just a normal part of our lives.

As our bodies change, so do our desires and emotions – and that is part of the process, too. We may have all kinds of new feelings, like crushes and being sexually turned on. Some of us might worry about the size and shape of our breasts, penis, vulva, testicles, nipples, lips and so on. This is often because of the so-called 'ideal' bodies shown in movies, on TV and in social media.

But knowing what to expect can make puberty seem less weird or stressful. And talking to our parents or other adults we trust also helps. After all, they've gone through puberty too!

We need to remember that each of us is unique just as we are. We should not be influenced by external models and instead discover and appreciate what we have and how we feel.



If you want to learn more about our body, you can find useful information on this reliable source:

- In Arabic, English, French and 10 other languages:
<https://www.zanzu.de/en/body/>
- In Italian, the website of the Ministry of Health:
<https://www.salute.gov.it/portale/fertility/dettaglioContenutiFertility.jsp?lingua=italiano&id=4551&area=fertilita&menu=fisiologia>

3. WHAT IS MENSTRUATION AND WHAT DOES IT ENTAIL?

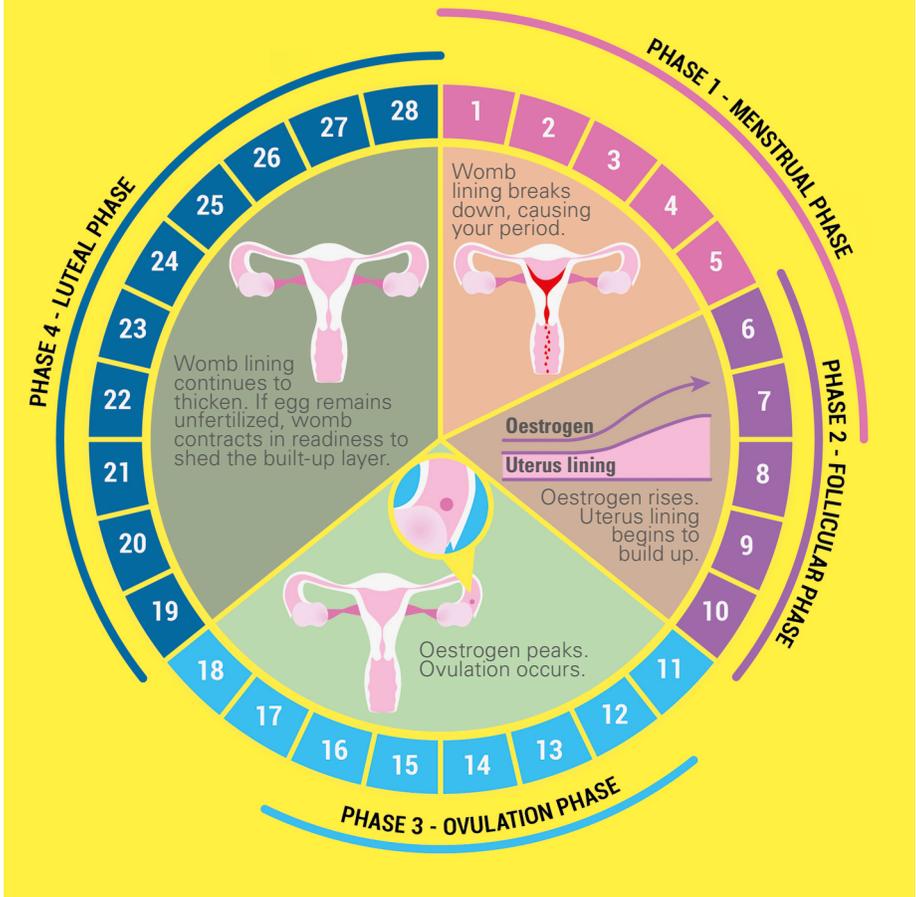
Menstruation is normal and happens to girls and women of reproductive age around the world. It is a natural process that is responsible for monthly bleeding for women and girls as well as transgender or non-binary individuals who menstruate, with blood and tissue from the uterus coming out of the vagina.

It is important to understand the menstrual cycle so we learn how to manage it every month. And it can tell us a lot about the functioning of our body.

The average menstrual cycle is 28 days, but it can range from 21 to 35 days. For younger people who have just started menstruating, the cycle can be very irregular at first. However, it is important to see a doctor if irregular cycles continue. Most girls get their first period when they're around 12. But getting it any time between age 10 and 15 is OK. There isn't one right age for a girl to get her period.

This natural process tells us a lot about our health, and is the most common way for someone to know whether they are pregnant or not: the monthly bleeding usually stops when a pregnancy starts. However, it is important to know that **bleeding does not guarantee that someone is not pregnant**, as bleeding can sometimes happen during pregnancies. If there is any doubt, discuss it with a medical professional and/or get a pregnancy test.

Menstrual cycle⁹



Menstruating can be uncomfortable for some people, and not for others. It is common to have cramps in the abdomen, feel bloated and have pain in the thighs and back. Some people also have headaches, constipation, nausea or dizziness. Others may feel tense, angry or emotional before and during their period. It is also normal to have less energy, tender breasts and acne. But there are some girls and women who don't have any of these symptoms at all. That is normal as well.

Girls can have a normal daily life while they are menstruating. To manage menstruation safely, hygienically and without shame we need to understand how to handle it.

- If we are in pain, this can be eased in many cases by applying gentle heat to the abdomen using, for example, a warm towel or taking a warm bath. If necessary, we can talk to a doctor about how to manage the pain and find the best solution for us.

Myths and facts about menstruation⁹

Women cannot have sex during menstruation.

False. There is no reason why a woman should avoid sex during her period. This is her choice.

If a woman has sex during menstruation, she can't get pregnant.

False. The chances of getting pregnant during menstruation are low. However, it is still possible to get pregnant if you have sex without contraception, given that every woman's ovulation cycle is different.

If a menstruating woman or girl touches the food or enters the kitchen, this will cause the food to go bad.

False. There is no scientific proof at all that menstruation causes food to go bad.

Menstruating women and girls cannot bath or take a shower.

False. There is no reason to avoid contact with water during your period - in fact, hygiene is very important at this time.

Menstruation is dirty or dangerous.

False. Menstrual blood is composed of regular blood and tissue, with no special or dangerous properties; so menstruating people do not need to be isolated or stigmatized.

A woman/girl that has not had vaginal sex cannot use a tampon.

False. Because of its small size, the use of a tampon does not pose any risk to women/girls who have not had vaginal sex.

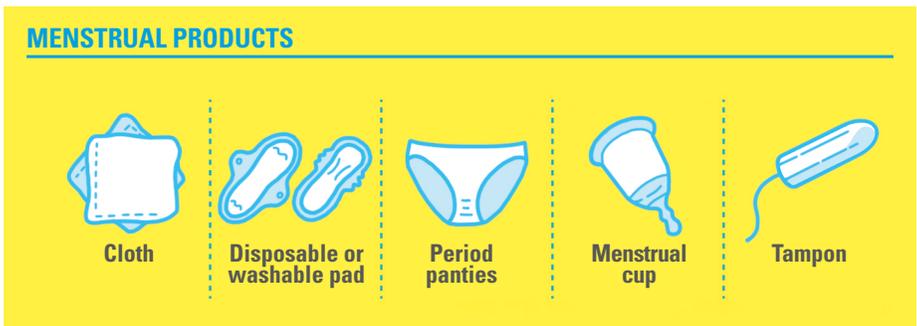
- Some people find that exercise helps to relieve cramps and makes them feel better in general. We can take part in any physical activity that we want to do.
- We should take good care of our personal hygiene: washing our genitals' external folds every day with clean water. After washing, we should dry ourselves properly using a clean towel or dry cloth.
- When we are menstruating, whatever we use – cloth, disposable or washable pad, period panties, menstrual cup, or tampon – we should make sure we change it every six to eight hours. Using it for longer can cause infections. We should also remember to wash our hands before and after changing the pad or cloth and dispose of the material hygienically.¹⁰



REFLECT

Ask yourself: “Do I have the **information** about how the menstrual cycle works? Do I know which products I can use while menstruating? Do I have all necessary information to manage my menstruations in a healthy and safe way?”

Enjoying good reproductive health is also about being connected to our body and knowing how it works.





We can start **tracking** our menstrual period using a normal calendar or by using a free app on our smartphone. It can also be useful to understand how we feel during the different phases of the menstrual cycle.

We should get informed on which menstrual hygiene materials are the most suitable for us among the many different options available, such as reusable menstrual pads; disposable menstrual pads; period panties; menstrual cups; and tampons.

Remember that if you experience pain or need more information, you can contact the services included under Question 6 (important things to know about sex).

There are many free apps that we can use to track the menstrual period. Here is one we recommend that also provides an overview of different products to help us manage menstruation. It is always important to do our own research and find the one that works best for us, making sure to read their privacy terms and conditions.

- In English, Chinese, French, Italian, Spanish, Turkish and many other languages:
<https://flo.health>

In addition, if you want to learn more about menstruation, you can find useful information on these reliable sources:

- In Arabic, English, French, and 10 other languages:
<https://www.zanzu.de/en/body/womans-body/menstrual-period/>
- In English:
<https://www.youtube.com/watch?app=desktop&v=ayzN5f3qN8g>
- In Italian, the website of the Ministry of Health:
[http://www.salute.gov.it/portale/fertility/dettaglioContenutiFertility.jsp?lingua=italiano&id=4553&area=fertilita&menu=fisiologia:](http://www.salute.gov.it/portale/fertility/dettaglioContenutiFertility.jsp?lingua=italiano&id=4553&area=fertilita&menu=fisiologia;)

4. AM I NORMAL?



STAY INFORMED

We are **all different** and unique and it is difficult to say whether 'normal' really exists. We might think that normal means being all the same. However, there might be different kinds of normal and there's really no such thing as a 'normal' looking body or 'normal' feelings.

An exciting part of our journey is understanding and embracing such diversity, and learning to value the needs and opinions of other people, regardless of their appearance, country of origin, gender identity, sexual orientation, age and so on.

As adolescents, we care very deeply about our friendships and relationships but, at the same time, we get worried about being judged for our appearance or behaviour. For example, social media and the need to gather 'likes' can have a strong impact on us. When we feel concerned, we should remember that each and every one of us has unique **strengths** and **talents**, as well as a unique **body**.

In particular, we all have our own beliefs and expectations about **sex and sexuality**, often influenced by wider attitudes, beliefs and behaviours that are common in our society, culture and family. But sometimes those topics are not discussed openly, and it can be difficult to find answers to our questions and reassurance for our doubts.¹¹

MASTURBATION: IS IT NORMAL?¹²

We might feel worried the first time we feel sexual desire, and this is definitely a common feeling! We may feel the urge to masturbate.

Masturbation is when we have sexual pleasure (alone or with others) by stimulating sensitive parts of our genitals, often to the point of orgasm – the peak of sexual arousal.

Masturbating gives us the chance to learn more about our own body, our attractions, and what we like and don't like. Masturbation will not harm us, physically or mentally. Of course, it's best to do it in private, somewhere we feel safe and comfortable and we don't invade someone else's privacy. At the same time, not everyone enjoys masturbation, and there is no reason to masturbate if you don't want to. That is perfectly normal too!

Myths about masturbation¹³



Masturbating can cause blindness.

✘ False. There is absolutely no connection between masturbation and vision (or hearing).



Masturbating can cause infertility.

✘ False. Masturbation does not lead to infertility in women and men.



Masturbation can make it impossible to have an erection.

✘ False. There is no relationship between masturbation and erectile dysfunction (when you can't get or maintain an erection).



Masturbation can give you hairy palms.

✘ False. There are no hair follicles in the palm of your hand, and, therefore, no hair!



Women and girls don't masturbate.

✘ False. It's common for people of any gender to do it, even if they don't talk about it!



REFLECT

When our first sexual desires begin, we may ask ourselves questions about our **sexual orientation and gender identity**, such as “am I attracted more to men, to women, to both or none?” Sometimes we might ask questions about our gender identity, such as “do I identify as being a male or female or something else?”

We may have other questions and doubts about our feelings on sex and sexuality. Sometimes we might wonder whether what we feel is right or normal.

What matters is that we recognize and appreciate our own unique characteristics, regardless of what other people expect of us or what they may think. Certainly, this is not always easy to do, but it is so important to learn how to **love and respect ourselves for who we really are!**



ACT

We can share our feelings and doubts with trusted adults and friends and do not hesitate to search for information! For more information on masturbation, for example, take a look at these reliable sources:

- In Arabic, English, French and 10 other languages:
<https://www.zanzu.de/en/sexuality/sex/masturbation/>
- In Italian, you can look at this section of the ISS website:
<https://www.issalute.it/index.php/falsi-miti-e-bufale/sexualita/la-masturbazione-fa-diventare-ciechi?highlight=WyJtYXN0dXJiYXppb25lIlI0=>

KNOW AND UNDERSTAND OTHERS

A positive and respectful approach to sex and relationships is a good first step to sexual health and to sex that is safe and pleasurable, without any violence or discrimination. Good sexual health means respecting and protecting our own sexual rights and the rights of our partner(s).

5. WHY DO RELATIONSHIPS MATTER?



STAY INFORMED

There are many types of **relationships** and also a lot of different ways to love someone. Here are some examples.

- Some of us try to build one special relationship with another person. These romantic relationships are an important part of life and can make us fulfilled and happy, but they can also be difficult and we often have to work hard to make them successful.
- Some people would rather not have a long-term relationship at all, and/or don't want to get married.
- Some people may want to be in a relationship or get married but are not allowed to do so, because of national, social or religious laws or norms. This can be a problem for people who want to be with someone of the same sex or someone from a different religion or ethnic group.

- Some people worry about finding a partner and about if and when they should start dating, or if they are even allowed to date someone who has not been chosen for them by their families.

Whatever the circumstances, there are some basic **ground rules** for a successful relationship. People in a good relationship make each other **feel safe, happy, cared for and secure**. They are happy to be intimate with each other and enjoy sex if and when they decide. In a good relationship, the partners respect each other, their bodies, their choices.

That is why it is so important to be **attentive**, and show respect for the feelings, beliefs, wants and needs of our partner(s). This helps us to build a strong foundation that recognizes and celebrates their unique value.

The concept of **'consent'** is also a key part of healthy relationships: an agreement to take part in a sexual activity. Before being sexual with someone, you need to know if they want to be sexual with you too. Also do not assume that because they have engaged in sexual activity in the past, they have already consented. Without consent, sexual activity is always sexual violence, no matter if the two people are a couple, married or in another kind of relationship: no one should ever feel under pressure to have sex.¹⁴

SEXUAL VIOLENCE

Sexual violence refers to any act of violence that involves sexual contact without consent and that will cause harm to the person experiencing it. Sometimes the persons experiencing the harm may not realize they are experiencing it. Consent is when we agree and accept to take part in sexual activity and it must be freely given, reversible, informed, enthusiastic and specific (consent is as easy as FRIES).¹⁵ It is important to give consent freely (without pressure or coercion by anybody) and in an 'informed' way, which means that the person should be old enough to understand and have all the necessary information about what sex is.

A person may feel that they must say "yes" when someone demands sex because they feel threatened, fear for their safety, or because they need to sell sex just to survive. This is why consent is so important, and we must remember that saying "yes" does not always mean consent! Sexual violence can happen to anyone, but some groups of people are more likely than others to experience sexual violence, such as girls and women.

The only person to blame for acts of violence is the perpetrator – the person who commits the violent act. It is never the fault of the person who is violated, no matter where it happened, when it happened, where they were, how they were behaving or how they were dressed. It has an impact on people in different ways, and it might have all kinds of long-lasting consequences – both physical and emotional.

With the right support and care, it is possible to recover from violence. There are doctors, nurses, psychologists, social workers, and law enforcement officers who can help. They will listen and offer support, and they must respect your privacy in line with their legal obligations.

Safety first!

- If you are in danger, call the emergency services 112 and go somewhere safe. Tell someone you trust, such as a parent, a guardian or a teacher.
- If you are under 18 (or if you want to report an emergency involving a child), call 114: it is free and operates 24/7.
- You can get confidential support from the Violence and Stalking National helpline by calling 1522 or downloading the 1522 app. The service is free of charge and is available 24/7 in Arabic, English, French, Italian and Spanish.

You can find more information about sexual violence and other forms of violence here:

- 12 questions and answers about gender-based violence, in Albanian, Arabic, Bengali, English, French, and Italian:
<https://onthemove.ureport.in/reports/>
- 12 questions and answers about sexual violence, in Arabic, English, French and Italian:
<https://www.unicef.org/eca/reports/supporting-male-refugees-and-migrants-who-survive-or-are-risk-sexual-violence>



REFLECT

Everyone is **different** and not everyone wants exactly the same kind of relationship. It is up to each of us to define the relationships that interest us, and that we are willing to build, when and with whom. And this may change over time.

A healthy sexual act is one that is entirely free of coercion, assault, rape, discrimination, violence and pain. All of us should be aware of our individual right to **stop** a sexual act at any time. Sex is **not compulsory**: there are healthy relationships that involve sexual abstinence, where the people involved do not have sex.

It is a good idea to think of the relationships that really matter to us. Looking at the information we have already talked about, what type of relationships are they? What makes them healthy or unhealthy?



Try these activities from the following reliable sources:

- In English, a self-reflection activity on healthy relationships:
<https://www.york.ca/wps/wcm/connect/yorkpublic/463ac6dd-1d95-4d93-9732-918375219ac0/SH+DVD+Student+Resource.pdf?MOD=AJPERES>
- In Arabic, English, French and 10 other languages:
<https://www.zanzu.de/en/relationships-and-feelings/relationships/>
- In English to understand more about consent watch this UNFPA video:
<https://youtu.be/LrUhUGTF1iU>
- Consent is more than saying Yes, in Italian:
<https://www.unicef.it/media/amore-e-consenso-san-valentino-piu-che-dire-si/>
- Consent is more than saying Yes, in English and French:
<https://onthemove.ureport.in/stories/#>

6. WHAT ARE SOME IMPORTANT THINGS TO KNOW ABOUT SEX?



STAY INFORMED

Sexual identity begins to emerge before puberty, but puberty brings with it a greater interest in sex and a greater range of sexual exploration. Sex is a common and healthy activity among humans, both for pleasure and reproduction.

Having sex means different things for different people, and there are different types of sex. It is important to know that having sex and sexual contact has some physical and emotional consequences that we need to acknowledge and recognize.

Pregnancy is one possible consequence of having sex. Pregnancies can be wanted, unwanted, or unplanned. The best way to lower the risks of pregnancies that are unwanted or unplanned is to protect ourselves. There are many forms of contraception that can be used for protection. You can consult a doctor to get advice.

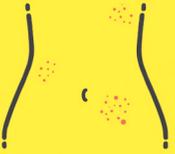
There are other risks related to sex we need to know about. Sexual violence and sexual exploitation, for example, are forms of violence that involve sex and can happen **in-person and online**.

Many bacteria, viruses and parasites can be passed on through vaginal, anal and oral sex and these can cause illnesses that are called **Sexually**

Transmitted Infections (STIs). Common symptoms of STIs include vaginal discharge, urethral discharge or burning or abdominal pain. But someone can have an STI without having any obvious signs. Many STIs can also be transmitted from a mother to her child during pregnancy and childbirth. STIs acquisition is also associated with substance use together with other sexual risk behaviors including inconsistent condom use.

Several STIs have severe health consequences if untreated; so, it is important to always test ourselves and be responsible when having sex. Early detection helps to minimize the health risks and prevents the spread of STIs to others.¹⁶

SOME COMMON SYMPTOMS OF SEXUALLY-TRANSMITTED INFECTIONS¹⁷

 <p>Unusual discharge/bleeding</p>	 <p>Skin rash</p>	 <p>Burning or pain when urinating</p>	 <p>Bumps, sores or blisters</p>
 <p>Itching or redness in genital areas</p>	 <p>Pain, such as lower abdominal pain</p>	 <p>Night sweats</p>	 <p>Unexplained weight loss</p>

If you or your partner are experiencing any of these symptoms, you should take an STI test.

The most common Sexually Transmitted Infections¹⁸



Genital warts

Growths found on or around the genital and anal areas. Genital warts are caused by a virus called human papillomavirus (HPV).



HPV (Human Papillomavirus)

A very common STI. HPV is usually harmless but it can sometimes cause cervical and other cancers including cancer of the vulva, vagina, penis, or anus. It can also cause cancer in the back of the throat, including the base of the tongue and tonsils.



Genital Herpes

A common STI that infects your mouth and/or genitals. Causes blistery sores. There's no cure, but symptoms are treatable.



Syphilis

Syphilis is a common bacterial infection. It's easily cured with medicine, but it can be dangerous if it is not treated.



Chlamydia

A very common STI caused by a bacterial infection. Doesn't always have symptoms, but easy to treat once it's diagnosed.



Gonorrhea

A common STI caused by a bacterial infection. Doesn't always have symptoms, but easy to treat once it's diagnosed.



HIV/AIDS

HIV is an infection that breaks down your immune system and can lead to AIDS. There's no cure, but treatment can help an infected person to stay healthy.

Human immunodeficiency virus (HIV) is an infection that attacks and breaks down the body's immune system. HIV destroys specific cells (called CD4 cells), weakening a person's immunity against infections and can lead to AIDS (Acquired Immunodeficiency Syndrome). AIDS is a medical condition in which the person's immune system is so compromised by HIV that other infections and diseases might occur with severe consequences to the individual.

HIV is transmitted through unprotected sex, blood transfusion, the sharing of contaminated needles in health-care settings and drug injection and between mother and infant during pregnancy, childbirth and breastfeeding.

Young people are particularly vulnerable to HIV (with 50 per cent of new infections occurring globally among young people aged 15 to 24).

The symptoms of HIV vary, depending on the stage of infection. Effective treatment, if started promptly and taken regularly, ensures a quality and length of life for someone living with HIV that is similar to that for someone who is not infected. However, there is no cure for HIV.

For these reasons, prevention is vital. For those who are sexually active, the best prevention is safe-sex behaviour. Safe sex includes using a condom; using it correctly and using one every time you have sex. This means learning how to use condoms and how to negotiate the use of condoms with your partner.

Testing is also crucial if you think you might be infected and testing is provided in several hospitals and public and private clinics in Italy, together with confidential counselling. **With proper care, people with HIV infection can live for many years, often without symptoms. It is also essential to know whether you are infected to avoid infecting others!**



REFLECT

Ask yourself: “do I have the **information** and the **skills** I need to protect myself and others?”

We can minimize the risk of HIV, STIs and unplanned pregnancies if we have the right information and we use contraceptive methods correctly.

Enjoying sex and good reproductive health is not just about the physical side. It's also about the quality of our relationships, the respect we give and receive, and our emotional well-being.



ACT

In Italy, you can call the toll-free number **800 861061** to ask about STIs, including HIV, and testing. You can call from Monday to Friday, between 1 pm and 6 pm. The service is free and totally confidential, and is available in Italian, English and French.

You can also have regular **medical check-ups** in hospitals and other authorized clinics. Find the one nearest to you at this page: <https://www.uniticontrolaids.it/aids-ist/test/dove.aspx>. Medical personnel have been trained on these issues, and the entire consultation and testing process should always guarantee your privacy and confidentiality.

You can also get more information on STIs by having a look at the following reliable resources:

- In Arabic, English, French and other 10 languages:

<https://www.zanzu.de/en/infections/sexually-transmitted-infections-stis/>

and specifically on HIV and AIDS:

<https://www.zanzu.de/en/infections/hiv-and-aids/>

- In Italian, the website of the Ministry of Health:
<http://www.salute.gov.it/portale/fertility/dettaglioContenutiFertility.jsp?lingua=italiano&id=4557&area=fertilita&menu=malattie>
- In English, the website of the Joint United Nations Programme on HIV/AIDS (UNAIDS):
www.unaids.org/en/frequently-asked-questions-about-hiv-and-aids
- In Italian, UNICEF website
<https://www.unicef.it/media/dieci-cose-da-sapere-su-hiv-e-aids/>

7. HOW SHOULD I PROTECT MYSELF AND OTHERS WHEN HAVING SEX?

Contraception methods²⁰

Internal condoms



Made from soft, thin synthetic latex or polyurethane. They are worn inside the vagina before sex to create a physical barrier.

External condoms



Made from very thin latex (rubber), polyisoprene or polyurethane. They are worn on the penis before sex to create a physical barrier.

Oral contraceptive or "the pill"



A pill that releases hormones into the body. The pill needs to be taken every day and at the same time.

Vaginal ring



A small soft, plastic ring that's placed inside the vagina and releases hormones.

Contraceptive diaphragm



A circular dome made of thin, soft silicone that's inserted into the vagina before sex.

Combined contraceptive patch



A small sticky patch that releases hormones into the body through the skin.

Implants



A small flexible plastic rod that's placed under the skin in the upper arm by a doctor or nurse. It releases hormones and lasts for 3 years.

Intrauterine device (IUD)



A small T-shaped plastic and copper device that's put into the womb (uterus) by a doctor or nurse.

Emergency contraception



Can prevent pregnancy after unprotected sex or if the contraception used has failed. There are two types of this contraception: the 'morning after pill' and the intrauterine device.



STAY INFORMED

Remember those risks linked to unsafe sex? Contraception can help to minimize them. Some methods can protect us from HIV, STIs and unwanted pregnancies, such as internal and external condoms. Others, such as the pill, the vaginal ring, the patch or other hormone-based contraceptives, prevent pregnancies but do not protect us against contracting an infection.

To reduce the risk of HIV, STIs or unplanned pregnancy we should use a **condom** every time we have sex with anyone else, from start to finish. We should not let anyone put pressure on us to have sex without a condom. Condoms come in many sizes, they are usually made of latex, but if you are allergic to latex, you can use a condom made from polyurethane. Condoms are effective when stored adequately (heat can damage them) and correctly used.

How to wear a condom²¹

<p>Step 1</p>  <p>Carefully open and remove condom from wrapper.</p>	<p>Step 2</p>  <p>Pinch air out of the tip of the condom.</p>	<p>Step 3</p>  <p>Place condom on the head of the erect, hard penis. If uncircumcised, pull back the foreskin first.</p>
<p>Step 4</p>  <p>Unroll condom all the way down the penis.</p>	<p>Step 5</p>  <p>After sex but before pulling out, hold the condom at the base. Then pull out, while holding the condom in place.</p>	<p>Step 6</p>  <p>Carefully remove the condom and throw it in the trash.</p>

For oral sex, direct contact between your mouth and the genitals or anus should be avoided. We should protect our mouth by having our partner use a condom or a latex sheet as a barrier between the mouth and the penis, vagina or anus.

Be aware that drinking alcohol or using drugs makes us less aware of what is happening, affects our ability to fully consent to sex, increases the chance that we will forget to take precautions, and makes us more likely to take risks, such as unprotected sex.²²



REFLECT

Sex education and information help us feel safer when having sex. The same goes for access to good quality health services and psychosocial support. We all have a responsibility to find out about the risks and use our knowledge to keep ourselves, and our sexual partner(s), as safe as possible.

Yes, there are risks of STIs and unplanned pregnancies, but they can be managed. Feeling safe before, during and after having sex is very important, both **emotionally** and **physically**. Having sex is a much healthier and happier thing to do when everyone involved feels safe and their boundaries are respected.

We should always ask ourselves: “Do I know enough about preventing pregnancy and HIV/ STIs? Is my sexual behaviour risky? What should I do to make sure I am safer?”



Some types of contraception (such as condoms) can be bought at the supermarket, pharmacy or from vending machines. It is important to always check the date and not to use out-of-date or incorrect condoms or lubricant, to avoid a split in the condom. External condoms have different lengths, so we should know the right size and/or ask a health specialist or pharmacist for advice.

For other types of contraception (such as the pill or the vaginal ring) we need to consult a doctor.

To be prepared, get more information about contraception from the following reliable sources:

- In Arabic, English, French, and 10 other languages:
<https://www.zanzu.de/en/family-planning-and-pregnancy/contraception/>
- In Italian, the website of the Ministry of Health:
<http://www.salute.gov.it/portale/donna/dettaglioContenutiDonna.jsp?lingua=italiano&id=4475&area=Salute+donna&menu=societa>

KNOW AND UNDERSTAND SOCIETY

We see people from all over the world – in person and online – of all shapes, sizes, ages, genders, personalities, shades of skin and shades of opinion. For a young person on the move who is now living in a new country, it can be difficult to get used to so many different kinds of people and their different views. We may feel that we are not understood, or that we are being judged. But remember, they are also trying to understand us!

8. THE BIG QUESTION: WHY DOES SEX EXIST?



STAY INFORMED

Sex has many purposes and plays a key role in our human societies. It brings people together, creates intimacy, and can form families. It provides physical pleasure, stress relief and intimate connections for individual people. It is also how our species reproduces.

Knowing how human bodies work, how babies are made or understanding pleasure are the first steps to answering the big ‘why’ question. But there is so much more to find out!

People from different cultures and many religions through the ages have seen sex as something so special that it is sacred, and perhaps even a divine gift: a way to show love to each other but also to create life.

Sexual behaviours and sexuality might also vary from culture to culture and these differences may create confusion and frustration.²³



REFLECT

If we hold strong beliefs, we may want to be sure that our sexual thoughts, desires and behaviour are in line with our religion, faith, culture, philosophy or role models. However, this can be sometimes difficult for people who have feelings and thoughts that do not align with the community and society they came from or are moving in to.

Whatever we decide, we need to be kind to ourselves. If we feel that we cannot live up to our ideals or those of other people, we should not punish ourselves for that. It is better to talk to a trusted friend or adult, perhaps someone like a teacher, a nurse, a physician or a psychologist, or an independent professional or spiritual counsellor.

We can ask ourselves: “How do my religious views influence my sexual behaviour and what do they teach me about my sexual orientation? How does the culture of the country I come from – and the country I live in now – influence my sexuality and the way I express it?”



ACT

This reliable website can help us answer the big ‘why’ question, but in the end, the decision is ours!

- In Arabic, English, French and 10 other languages:
<https://www.zanzu.de/en/sexuality/>

9. IF SEX IS A UNIVERSAL THING, DOES EVERYONE EXPERIENCE SEXUALITY THE SAME WAY?



STAY INFORMED

Human sexuality is much more than sex: it is also about **gender identities and roles, sexual orientation**, eroticism, pleasure and intimacy and it has strong links to reproduction. There are many ways people experience and identify their sexuality. Let's look at some important concepts to better understand it.

Gender refers to the roles, behaviours, activities, characteristics and opportunities that any society considers appropriate for girls and boys, women and men.

Sexual orientation is an enduring pattern of romantic or sexual attraction (or a combination of these) to people of the opposite sex or gender, the same sex or gender, or to both sexes or more than one gender.

Gender identity is our personal sense of our own gender. Gender identity can be linked to our assigned sex at birth or can differ from it.

Some terms can be new or confusing for some of us, so it is important to include some key definitions for building a common understanding and embracing diversity. Remember those concepts (and our understanding of them) are in constant evolution and so is our language.

Heterosexual refers to people who are attracted to people of the opposite sex or gender.

Cisgender describes someone who feels that they are the same gender (or sex) as the physical body they were born with.

We also hear the acronym LGBTI, the letters stand for:

- **Lesbian** (a person who identifies themselves as a woman, who experiences sexual, romantic, or emotional attraction to other women)
- **Gay** (a person who identifies themselves as a man, who experiences sexual, romantic, or emotional attraction to other men)
- **Bisexual** (someone who experiences sexual, romantic or emotional attraction to people of all genders)
- **Transgender** (people whose gender is not the same as the sex assigned at birth). Transgender may also add any of the other letters when describing themselves, because sexual orientation is not the same as sexual identity
- **Intersex** (people born with any of several variations in sex characteristics, including chromosomes, gonads, sex hormones or genitals that do not 'fit' with the typical definitions for male or female bodies).

More generally, LGBTI is an umbrella term used in this brochure to refer to people of diverse sexual orientation, gender identity, gender expression and sex characteristics. However, it is important to remember that the list above does not cover everybody, and there are many terms used to refer to people who do not conform to conventional or traditional notions of male and female gender roles, such as LGBTI+, LGBTQ and LGBTQAI.²⁴



REFLECT

As individuals, we are all different but all equal, and part of a human community that is so **diverse**. Life would be very dull if we were all the same!

Sexuality is influenced by the **world** around us, including biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious and spiritual factors.

Sexuality is also about **our own** identity, the way we experience and pursue (or do not) sexual and romantic attraction, relationships and behaviours.

So, we may ask ourselves: "How would I describe myself? What are my sexual and romantic experiences, if any, so far? Do I have any preferences when it comes to finding a partner?"

Answering these questions may help us get to know ourselves, our feelings and interests, better.

However, every human being is such a rich and unpredictable combination of emotions, attitudes and thoughts, as well as external and inner features; and that the way we behave during a sexual or romantic relationship at one moment in time does not necessarily define who we are forever.



More information is available from the following reliable sources:

- In Arabic, English, French and 10 other languages:
<https://www.zanzu.de/en/relationships-and-feelings/men-and-women/>
- In Italian, visit this institutional website:
<https://www.infotrans.it/>
which includes a glossary on the key terms.

10. WHAT ARE SEXUAL AND REPRODUCTIVE RIGHTS?

What are the sexual and reproductive rights?



We have the rights to the highest attainable standard of health (including sexual health) and social security.



The rights to information, as well as education.



The rights to freedom of opinion and expression.



The right to marry and to found a family and enter into marriage with the free and full consent.



The right to privacy.



The right to decide the number and spacing of one's children.



The rights to equality and non-discrimination.



The right to be free from torture or to cruel, inhumane or degrading treatment.



The right to an effective remedy for violations of fundamental rights.



GET INFORMED

Human rights are the rights that all of us have as human beings, whatever our nationality, wherever we live now or came from originally, whatever our sex or ethnic group, our colour, religion, language, sexual orientation, gender identity or any other characteristic.²⁵

Human rights include some sexual rights that are part of national laws. They include the right of each of us to live our lives – including our sexual lives – free of coercion, discrimination and violence, regardless of our sexual orientation and identity or nationality. **Access to health care** is also a human right, and health care should be made available to anyone.²⁶



REFLECT

For all of this to work out for everyone, each one of us must respect the rights of everyone else. And for lasting sexual and reproductive health, each one of us must also respect and protect the sexual rights of everyone else.

So we should ask ourselves: “Are my rights being respected and do I respect the rights of others? How can I support and protect the rights of those who are disadvantaged because of various factors?”



ACT

You can find more information on the following reliable websites:

- In Arabic, English, French and ten other languages:
<https://www.zanzu.de/en/rights-and-law/your-rights/>

- Watch the UNFPA video “Bodily Autonomy” on how sexual and reproductive health rights matter for our lives, which is available in [Arabic](#), [English](#), [French](#), and [Spanish](#).
- In Italian, visit the following website:
http://dirittiumani.donne.aidos.it/bibl_1_temi/c_indice_diritti_liberta/c_diritti_trasversali/c_dir_sessuali_riproduttivi/b_diritti_sess_ripr_introd.html

11. WHERE CAN I GET SUPPORT?



GET INFORMED

The most important places in Italy where you can get sexual and reproductive health information services are called **Consultori**: public health services that help individuals and families. Here you can get confidential support, information and services from health and social professionals, including gynaecologists, obstetricians, psychologists and social workers.

The services offered by Consultori differ slightly from one region to another. In most cases, you'll get free support, while in other cases you'll have to pay a small fee. The services offered by the Consultori are guaranteed for **everyone**, including:

- migrants and refugees who are regular and have a health card (*tessera sanitaria*), which can be obtained at the ASL (*azienda sanitaria locale*)
- migrants and refugees who do not have a health card can obtain a STP (*straniero temporaneamente presente*) CODE, which can also be obtained at your local ASL.²⁷



REFLECT

Remember that it is your right to access comprehensive and quality health care services, including services for sexual and reproductive health. This is important to maintain your health, and to prevent and manage disease.

So we should ask ourselves: "what would I do if I needed or wanted sexual and reproductive health services? Do I know where to ask for help and support?"



Make sure you know where you can find the nearest Consultorio to you!

You can find more information on the following reliable sources:

- In Italian, you can find it by searching the website of the Ministry of Health of Italy:

<http://www.salute.gov.it/portale/donna/consultoriDonna.jsp?lingua=italiano&id=4524&area=Salute%20donna&menu=consultori>

- You can also find more information in Italian on Consultori here:

<https://www.epicentro.iss.it/consultori/indagine-2018-2019>

12. WHAT HAVE I LEARNED? ;)

1- Do you think boys, girls, young women and young men should all have access to open and honest information about sex and sexuality?

- a. Yes
- b. No
- c. I don't know

2- Do you know where you can get sexual and reproductive health services and information?

- a. Yes
- b. No
- c. I don't know

3- Which of these statements about pregnancy is true?

- a. A woman/girl can get pregnant at any time during the menstrual cycle
- b. Women have different ovulation cycles and may remain fertile for a number of days, which varies from woman to woman and from cycle to cycle
- c. There is no risk of getting pregnant when a woman is menstruating
- d. I don't know

4- Which of these statements about condoms is true?

- a. They are only available in one size
- b. They are most effective when used with a lubricant and another form of contraception
- c. They are only available to those who are over 18 years old
- d. They are not useful to reduce the risk of Sexually Transmitted Infections (STIs)
- e. I don't know

5- Which of these statements about menstruation is true?

- a. The menstruation cycle lasts 28 days
- b. When menstruating you cannot get pregnant
- c. Menstruating can cause discomfort for some people, while others experience no discomfort

6- Which of these statements about sexuality is true?

- a. The only function of sex is reproduction
- b. Individuals will always feel attracted to the other gender throughout their lives
- c. Our sexuality is influenced by our surrounding world as well as our own experiences

7- Which of these statements about masturbation is true?

- a. It can be harmful to women
- b. It can affect a man's ability to produce sperm
- c. It is a crime in Italy
- d. It is a common and healthy activity
- e. I don't know

QUIZ ANSWERS

- 1-** *The correct answer is a.* Access to comprehensive, good quality health care services is important to promote and maintain our health, prevent and manage disease, reduce unnecessary disability and premature death, and achieve health equity for all human beings.
- 2-** In Italy, you can get help at a Consultorio. You can also check out online sources of help and advice.
- 3-** *The correct answer is b.* As ovulation cycles differ, each woman or girl can remain fertile for a number of days and this varies from person to person and from cycle to cycle.
- 4-** *The correct answer is b.* Condoms are most effective when used with a lubricant and another form of contraception. Condoms used by males and females are available in several sizes (you may discuss this with the pharmacist or health professional). In Italy, condoms can be purchased by anyone without any age restriction, and some organizations might also provide them for free. Internal or external condoms have two main roles: to reduce the risk of pregnancy and the risk of transmitting sexually transmitted infections (or STIs).
- 5-** *The correct statements are c and d.* The menstruation cycle varies from one person to another and helps us understanding how our body is functioning. Menstruation can cause pain and discomfort for some individuals, while others might feel completely normal.
- 6-** *The correct statement is c.* Sexuality is shaped by external biological psychological, social, economic, political, cultural factors as well by our own identity, relationships and behaviours.
- 7-** *The correct statement is d.* Masturbation is a common and natural activity, and a safe way to explore our body. It happens among people of all ages, backgrounds, genders and ethnic groups. Despite the myths about masturbation, it has no harmful physical effects.

ENDNOTES

¹ https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf

² The other languages are Albanian, Bulgarian, Dutch, Farsi, German, Polish, Romanian, Russian, Spanish and Turkish.

³ Even though gender is a non-binary concept, this brochure refers to a binary definition of female (women/girls) and male (men/boys) sexual and reproductive organs and development which does not necessarily take into account their gender identity, that might be different than their assigned sex of birth.

⁴ https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf

⁵ www.unfpa.org/female-genital-mutilation) and (<https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation#:~:text=More%20than%20200%20million%20girls,rights%20of%20girls%20and%20women>

⁶ www.who.int/reproductivehealth/publications/fgm/FGM_infographics/en/

⁷ The languages are the same listed on note 2 (the same is valid through the entire document with regards to materials of <https://www.zanzu.de/en/>

⁸ Graphic adapted from <https://www.womenshealthmatters.org.au/womens-health-wellbeing/sexual-and-reproductive-health/knowning-your-body/the-menstrual-cycle/>

⁹ Apapted from <https://www.unfpa.org/menstruationfaq#Taboos%20and%20Myths%20about%20menstuations> and [https://www.issalute.it/index.php/falsi-miti-e-bufale/salute-della-donna?filter_tag\[0\]=152](https://www.issalute.it/index.php/falsi-miti-e-bufale/salute-della-donna?filter_tag[0]=152)

¹⁰ www.unfpa.org/menstruationfaq) and (https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf

¹¹ https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf

¹² Ibid.

¹³ Adapted from <https://www.issalute.it/index.php/component/tags/tag/falsi-miti-e-bufale-sessualita> and <https://www.zanzu.de/en/sexuality/sex/masturbation/>

- ¹⁴ https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf
- ¹⁵ www.plannedparenthood.org/learn/relationships/sexual-consent
- ¹⁶ https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf and https://www.who.int/health-topics/sexually-transmitted-infections#tab=tab_1
- ¹⁷ Adapted from https://www.who.int/health-topics/sexually-transmitted-infections#tab=tab_1
- ¹⁸ Adapted from <https://scdhec.gov/infectious-diseases/hiv-std-viral-hepatitis/sexually-transmitted-diseases>
- ¹⁹ www.unaids.org/en/frequently-asked-questions-about-hiv-and-aids
- ²⁰ Adapted from:
https://www.un.org/development/desa/pd/sites/www.un.org.development.desa.pd/files/files/documents/2020/Jan/un_2019_contraceptiveusebymethod_databooklet.pdf
- ²¹ Adapted from <https://www.letstalkaboutit.nhs.uk/contraception/condoms/> and https://www.zanzu.de/en/all-results-for/?tx_solr%5Bq%5D=condom
- ²² www.unfpa.org/family-planning
- ²³ https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf
- ²⁴ https://www.ohchr.org/Documents/Publications/Born_Free_and_Equal_WEB.pdf
- ²⁵ United Nations Human Rights Office of the High Commissioner, International Human Rights Law & Sexual Orientation & Gender Identity, <https://www.unfe.org/wp-content/uploads/2018/10/International-Human-Rights-Law-English.pdf>
- ²⁶ https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf) and (https://www.unfpa.org/sites/default/files/pub-pdf/UF_SupplementAndUniversalAccess_30-online.pdf
- ²⁷ <https://www.epicentro.iss.it/consultori/>

KEY RESOURCES

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UNAIDS, UNESCO, UNFPA, UNICEF, UN Women, WHO, *International Technical and Programmatic Guidance on Out-of-School Comprehensive Sexuality Education (CSE)*, Geneva, 2020 (www.unfpa.org/featured-publication/international-technical-and-programmatic-guidance-out-school-comprehensive)

International Federation of the Red Cross and Red Crescent (IFRC), *Menstrual Hygiene Management Portal*, Geneva (<https://watsanmissionassistant.org/menstrual-hygiene-management/>).

The Population Council. *It's All One Curriculum: Guidelines and Activities for a Unified Approach to Sexuality, Gender, HIV, and Human Rights Education*, New York, 2009 (https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf)

UNESCO. *Puberty Education & Menstrual Hygiene Management. GOOD POLICY AND PRACTICE IN HEALTH EDUCATION BOOKLET 9*, Paris, 2014 (<https://unesdoc.unesco.org/ark:/48223/pf0000226792>)

About this brochure and its creators

UNICEF is the United Nations Children's Fund. Its ambition is to get the entire region working together – as one – on behalf of its most vulnerable children. Worldwide, UNICEF works in over 190 countries and territories and in the world's toughest places to reach the children and young people in greatest need. In Europe and Central Asia, UNICEF works in 22 countries and territories. UNICEF also responds to the needs of all uprooted girls and boys traveling to Europe at every stage of their journey, urging governments to protect their rights.

UNFPA is the United Nations sexual and reproductive health agency. Its mission is to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. It supports women and youth in more than 150 countries – and nearly 20 countries in Eastern Europe and Central Asia – urging governments to ensure that the reproductive health and rights of women and young people, including young migrants and refugees on the move, are respected.

This brochure was put together with help and feedback from migrant and refugee young people in Italy, to whom we are very grateful. The main authors are Robert Thomson and Alexios Georgalis, Maria Margherita Maglietti and Francesca Rivelli. Inputs from UNFPA were coordinated by Emmanuel Roussier and Rune Brandrup and Katherine Nichol; and those from UNICEF by Maria Margherita Maglietti. We are also grateful to Giorgia Airoldi (UNICEF), Camilla Caron (UNICEF), Silvia Li Quadri Cassini Finaurini (UNICEF), Nina Ferencic (UNICEF), Sheeba Harma (UNICEF), Damilola Walker (UNICEF), Chiara Curto (Italian National Committee for UNICEF), Marta Fiasco (Italian National Committee for UNICEF), Baran Caglar Cetinkaya (UNFPA), Ekin Ilke Kelesoglu (UNFPA), Hakan Ozkan (UNFPA), Sevcan Hacilar (UNFPA), Ana Mosiashvili (Y-PEER), and Ulukbek Batyrgaliev (Y-PEER).



Information in this brochure was specifically developed for the migrant youth in Italy and intends to fill an information gap within this specific context. The brochure was jointly developed in close consultation with youth through a process of co-creation. Numerous young people generously engaged in a research process and offered their time and insights to make sure that the content fits their needs and channels their voices.

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STRENGTHENING REFUGEE AND MIGRANT CHILDREN'S HEALTH STATUS

IN SOUTHERN AND SOUTH-EASTERN EUROPE



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