



Advocacy for Integrating Youth Friendly Health Protocols in Balochistan Health policy 2014

Right to say

Society for Mobilization Advocacy and Justice (SMAAJ)

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SMAAJ is in agreement with PARWAN Alliance 2011- 2015 supported by RutgersWFP. PARWAN (Unite For Body Rights) for promotion of SRHR and SGBV (Sexual and Reproductive Health Rights and Sexual and Gender based violence) in Quetta district based on the study conducted by Rutgers WFP as baseline research for its UFBR program.

Programme Background

RutgersWFP launched a 5 years PARWAN (Unite For Body Rights) project for the SRHR (Sexual and Reproductive Health Rights) education in Multan & Quetta districts (with AwazCds and PIDS respectively) and for this purpose Life Skills Based Education (LSBE) has been adopted as a mean to empower young people in challenging situation. It refers to a process of providing awareness and equipping youth with prevention of techniques to enable them acquire knowledge, skills and develop attitudes for adopting healthy behaviours. The main objectives of the program are as under:

Program Objectives:

1. Increased capacity of young people, women and marginalized groups to make safe and informed decisions on issues concerning relationships and sexuality, to deal with gender power relations and to seek quality, comprehensive SRHR services and information.
2. Increased quality of and access to comprehensive SRHR and SGBV services for young people, women and marginalized groups
3. Increased capacity of civil society organizations to manage SRHR education and services interventions.
4. Policy dialogue maintained or increased in favour of SRHR in civil society organization's countries and/or the region.

Strategic Goal

The goal of overall advocacy strategy derives from the overall aim of the project which intends to create an enabling environment for the realization, of Sexual and Reproductive Health & Rights in the education and health sector.

Within the strategy, under the umbrella of PARWAN SMAAJ has advocated;

- To integrate youth friendly health service protocols in provincial health policies

Objective: 1

To advocate for the inclusion youth friendly health services protocols at Provincial health policy with a special reference to Sexual and Reproductive Health & Rights by 2015.

The purpose is to cater to the SRH needs of young people by providing timely, safe and non judgmental health services by sensitizing the health service providers on issues of young people’s SRHR with a rights-based approach. Different advocacy tools have been adopted to bring improvements in the existing health management systems by introducing treatment and counselling protocols and by building capacity of service providers to cater to the sexual and reproductive health needs of young people through rights based approach i.e. no discrimination on the basis of gender, sexual identity, marital and socio economic status. SMAAJ has adopted the following activities and steps to incorporate health protocols in health policy,

Advocacy Objective: To advocate with Provincial Health Minister, Secretary Health, Director General Health & District Health Officer for integrating Youth Friendly Sexual and Reproductive Health services in Provincial Health Strategies			
S.#	Topic	Meeting Objectives	Stakeholders
1	Orientation & Consultative Meetings with Directorate Health	To orient the officials about significance of YF Health services and afterwards to submit YF-SRH protocols to be further integrated in health policy	Health Department officials i.e. Secretary, Additional Secretary Health, Director General Health, District Health Officer
2	Meetings with Media Networks	To orient various media personals about significance of YF Health services and to seek their support for the cause	Print Media Digital Media
3	Meeting with Like minded organizations	To orient various organizations about significance of YF Health services and to seek their support for the cause	INGOs Local NGOs
4	Meeting with Youth groups	To orient various Youth groups to be identified with the support of alliance members about significance of YF Health services and to seek their support for the cause	Youth Volunteers PARWAN Alliance
5	Sensitization meetings with Provincial Health Minister	To sensitize health minister about significance of YF Health services to be further integrated in health policy	Health Secretariat
6	Printing of Advocacy Messages (1000 brochure)	Various messages would be printed for different stake holders	Health Department officials Media

SMAAJ Advocacy for YF Health Protocols Campaign

7	Formation of Pressure group	Pressure group would be formed to further advocate for integration of YF-Health protocols in policies	Media Youth Groups INGOs/NGOs
8	Meeting of Support/pressure group	To expedite the integration process	Pressure group
9	Sensitization sessions on early age marriages	To sensitize teachers & students on harmful effects of early age marriages	Girls students Teachers
10	Sensitization sessions on domestic violence	To sensitize teachers & students on harmful effects of Domestic Violence	Girls students Teachers

Introduction and process

SMAAJ acknowledges the benefits of investing in young people's development and health, including their sexual and reproductive health and rights for achievement of its national aim of improving quality of life. SMAAJ recognizes that programmes for young people (age group of 10-24 years) are crucial to address the prevailing vulnerabilities including limited knowledge about their Sexual and Reproductive Health and Rights and almost negligible access to SRHR services; although carrying the growing burden of sexually transmitted infections including HIV and AIDS, sexual abuse and other life threatening challenges.

This proposed activity was to conduct meeting with health department and the main propose of the meeting that the Alliance to support youth health rights and recommended for insertion in the Draft Balochistan Health Policy 2014.

It is important to address the health needs of young people for their physical, mental and emotional wellbeing. According to World Health Organization (WHO) youth friendly services are defined as health services that are effective, safe and affordable, they meet the individual needs of young people who return when they need to and recommend these services to friends'. These services are delivers by health care provider who offer safe and non judgmental care, advice and support.

It is imperative that youth friendly health services become a part of minimum standard delivery service and package that cater to young people's right to information and services related to their reproductive health and rights. Ideally, youth friendly health services should include a wide range of services with referral to specialists and specialized services such as.

Meeting with Health Department

In health secretariat we had meeting with Dr. Afzal Ahmed (Deputy Director) to discuss health protocols. He appreciated the idea and for further detail he arranged a meeting with Dr Sultan Ahmed (Provincial Coordinator Health Information). Health protocols have been handed over to Dr. Sultan Ahmed. He appreciated the idea and for further he discussed the detail with Professor Dr. Sikandar Riaz (Director Institute of Public Health) focal person for Balochistan Health Policy.



Dr Sultan Ahmed (Provincial
Coordinator Health Information)

Out put

It was very good discussion with Deputy Director and the coordinator. They appreciated the idea and assure that since health policy is under developing phase and would be finalise soon, therefore before finalization the policy health protocols will be discussed by the committee with PARWAN Alliance for which they will be contacted to arrange meeting and discuss the possibilities. Hard and soft copies of the letter and protocols have been submitted to Dr. Sikanda Riaz for their review



Meeting with Dr. Sikander Riaz
(Director IPH)

2nd round meeting held with In Institute for Public Health (IPH) Dr. Sikandar Riaz (Director IPH) where he was already aware about the concept as he had received SMAAJ letter and protocol. He appreciated the idea and said that he would need time to discuss and share it with other committee members. He acknowledged the significance of the protocols and he assured that the committee will give more importance to these protocols. He further said that IPH will open all facilities and support Alliance. He also said that Alliance member will be invited to meet committee to discuss their ideas. He further said that IPH foresee to work with Alliance.

SMAAJ team met Secretary Health Dr. Arshad Bughti. The purpose of the meeting was to share and orient on youth friendly health protocols. He appreciated and assured his support to take this on priority. He said will meet again to discuss this in detail and meanwhile he will review the protocols and discuss with policy committee. It was very good discussion with secretary health. He appreciated the idea and assured that since health policy has been under developing phase and would be finalise soon therefore before finalization of the policy health protocols he will discuss this with SMAAJ representative again. Overall he was quite positive and showed his positive gesture.



Meeting with Mr. Arshad Bughti
Secretary Health Balochistan

Media role

1st Meeting

Media representative has been oriented on health protocols and got their opinion on that. While media launch any campaign related to youth they must involved youth in all thier programme design. It was discussed in detail that Media has important role to aware push

government to integrate youth friendly health protocols in Balochistan health policy. During presentation Media persons have been oriented on the following.

- Information about youth friendly health services
- Counselling
- Adolescent development including feelings, body image relationships issues, adult- adolescent relationship, peer pressure, bullying, gender dynamics etc.
- Youth reproductive health issues including bodily changes, myths and misconceptions, around the issue
- Services for those who experiencing sexual, physical and emotional violence
- Pre and post natal care
- STI/HIV testing and treatment
- Services facility located at place which can be easily accessed
- Youth friendly reading material, poster etc should be placed in the facility
- The waiting time should not be long or the waiting place must not be overcrowded
- Timing of the services do not clash with the school, college timing
- The rooms where counselling and clinical services are provided should ensure privacy (both auditory and visual) in order for young people to talk openly
- Services for young people should ideally be free of cost or it is not possible, they should be affordable.
- The services must be located be in facility where the waiting area is sheltered from rain and sun, with availability of clean drinking water
- The counselling and clinical procedure must be undertaken in a private rooms/place
- It is suggested that separate rooms for male and female clients, clearly marked as such, must be available
- Feedback should be taken from clients to assess sensitivity and quality of services at a regular basis
- To create a non-judgmental and natural atmosphere competency and relevant qualification must be assessed during the hiring and recruitment process
- Hiring of young people as per educators and counsellor must also be considered
- It is required that the provider believes in the rights of young people to choose and access services, and exhibit a non judgmental and respectful attitude, free of personal biases



2nd Meeting

It was discussed in detail that Media has important role to aware push government to integrate youth friendly health protocols in Balochistan health policy. During presentation Media representatives have been oriented on the that YF health protocols and informed that such protocols has been submitted to Minster health, Secretary health and Director IPH focal person for Balochistan Health Policy. They appreciated the effots and assured that they will highlight this issue in



Meeting with President Quetta Press Club

print and elctronic media. In this meeting youth has taken intiative to take lead and present thier case in medai. They presented thir case and expalined thier basic rights for YF health protocols. Medai apprciated thier effots and deciminted thier press conference through print.

3rd meeting

SMAAJ has visited all media offices (print and electronic) to have detail discussion on YF health protocols. They were oriented on the concept and YF health services protocols. They also assured that they will print articles and will give more space and highlight this issue at high level. The team met president and General Secretary Press Club Quetta where they assured that they will support the cause and will orient other media representative to highlight the issue.



SMAAJ Advocacy for YF Health Protocols Campaign

SMAAJ got positive response from print media. Coverage has been given in all news paper also representative from all print and electronic media participated actively. They welcomed SMAAJ team and appreciated their efforts. They assured that they will advocate the case. They also highlighted YF health issues in their news papers.



Meeting with Secretary Quetta Press Club



Meeting with Like minded organization

The purpose of this activity was to have meeting with health like minded organization those who are working on reproductive health and rights get their support for Integrating Youth Friendly Health Protocols in Balochistan Health policy.

SMAAJ team met to the following like minded organizations,

SNo	Name	Designation	Organization
1	Mr. Sheer Jan	Provincial Head	MARIE STOPES SOCIETY
2	Mr. Moladad	CEO	MRDS
3	Mr. Adil Jahangir	CEO	Add Balochistan
4	Me. Kabeer Khan	Programme Manager	CPD
5	Mr. Nadeem	HR Officer	MEDECINS FRONTIEES
6	Mr. Mohammad Khalil	Programme Manager	GRHO
7	Mr. Hameedullah	CEO	Youth Organization
8	Mr. Ahmad Nawaz	CEO	NCBP
9	Mr. Zahor Ahemed	Counselling Officer	FPAP
10	Mraasghar	HR	MSF

They were individually briefed on the cause and share the document that has been submitted to Minister Health, Secretary Health, and Director IPH. All of them appreciated the efforts and assured that they are there for support and will be part of campaign. They are willing to jointly visit to meet core committee and minister to endorse for Integrating Youth Friendly Health Protocols in Balochistan Health policy.

Out come

Most of these organizations are willing to extend their support but still need more commitment and efforts to endorse the idea.



Meeting with youth

The purpose of this meeting was to orient Youth about significance of YF Health services and to seek their support for the cause and oriented them for Integrating Youth Friendly Health Protocols in Balochistan Health policy.

Following participants participated in the meeting,

Group1:

SNo	Name	Contact No	Address
1	Kaleemullah	03118017721	Nawa Killi Quetta
2	Ayaz Ahmed	03003886509	Saryab Rood Quetta
3	Naemurehaman	03443373614	Sabzal Road Quetta
4	Waheed Shah	03122530479	Gulistan Road Quetta
5	Akash	03012698227	Akhter Mohammad Road
6	Naseebullah	03125025201	Sarki Road Quetta
7	Auranzaib	03108088893	Chaman Patak Quetta
8	Zarmand kasi	03002000159	Shahbaz Town Quetta
9	Talah Dar	03434999490	Chaman Housing Scheme
10	Khalid Hussain	03318102108	Chaman Housing Scheme
11	Syed Sufian	03138283893	Chaman Housing Scheme

Group2: Sardar Bahadur Khan University (SBK)

SNo	Name	Address
1	Sadia Khan	Nawa Killi Quetta
2	Mohiba Sarwar Shah	Killi Gul Mohammad
3	Gulalai	Khanozai District Pishin
4	Hasina	Khanozai District Pishin
5	Romila	Ziarat
6	Mehawidh Hashmani	Pishin
7	Farzana	Quetta
8	Nahida	Nushki
9	Shagufta	Quetta
10	Zaiaba	Pishin
11	Farhana Amin	Kuchlak Quetta
12	Fatima Gul	Quetta
13	Nadia Imran	Quetta

Group 3: Virtual University

SNo	Name	Address
1	Sehrish Razaq Shah	Virtual University
2	Quratulain	Virtual University
3	Najm ul Sahar	Virtual University
4	Bilal Qureshi	Virtual University
5	Asad Hussain	Virtual University
6	Hashmat khan	Virtual University
7	Mohammad Waqas Hashmi	Virtual University
8	Zarlashta Khan	Virtual University
9	Shigrat Naz	Virtual University
10	Najeebullah	Virtual University

The participants were briefed on the cause and share the document that already submitted to Minister Health, Secretary Health, and Director IPH. All of them appreciated the efforts and assured that they are there for support and will be part of campaign. They are willing to jointly visit to meet core committee and minister to endorse for Integrating Youth Friendly Health Protocols in Balochistan Health policy. They agreed to share the information with other youth and friends. It was decided that through social media these information will be share to reach maximum youth. Leaflets on YF health and protocols were shared with them for their further action.

Out come

The participants were found enthusiastic to this opportunity and ready to work for their age group. They were keen to meet policy makers and also face media to share their programme and get support from media. They will develop Fb id to share all relevant information with their friends and other youth to reach maximum numbers whereas two groups developed their FB ids and people joining them on their ids

1. *First group FB ID* **(Youth Rights Services)**
2. *Second group FB ID* **(HULK (Health Union Literacy Knowledge))**



Meeting with Stakeholders (Pressure group)

This proposed activity was to form pressure group to further advocate for integration of YF-Health protocols in health policy therefore had meeting with health department and other stakeholders those who are working on reproductive health also to get their support for Integrating Youth Friendly Health Protocols in Balochistan Health policy.

The participants were briefed about the progress and explained the stapes taken. They were briefed about the background and objectives of the programme, activities, meeting with all stakeholders, forming youth male female pressure groups.

The majority of the participants appreciated the efforts and assure their support and will be part of pressure groups. The document has been shared with participants. All of them appreciated the efforts and assured that they are there for support and will be part of campaign. They are willing to jointly visit to meet core committee and minister to endorse for Integrating Youth Friendly Health Protocols in Balochistan Health policy.

Most of these organizations are willing to extend their support but still not good support from some Alliance members and this really a challenge bring them on the concept working as Alliance. Youth pressure groups is more pro active and enthusiastic to take lead.



The participants suggested that more visibility information should be disseminated with all stakeholders. Training will be provincial Assembly for discussion. conducted for youth pressure groups. Molana Gul Mohammad was keen to take this issue to

A separate meetings have been organized with the following religious leaders/MPA and MNA of the region,

SNo	Name	Status
1	Molana Ameeruzman (GUIF)	MNA
2	Haji Gul Mohammad Dumar (GUIF)	MPA
3	Movi Mazullah (GUIF)	MPA

2nd stakeholder workshop

In this workshop all stakeholders in clued bar council, religious people, media, like minded organizations, college professors, youth and civil society were participated actively. Secretary bar council assured his support at all level and advocate for the cause. Religious leader explained that it is very important to educate youth and support their case at government level. They also assured that they will support the cause. The participants suggested that more visibility information should be disseminated with all stakeholders. Further workshop and seminar need to be organised at policy level to hight the issue.



Session on early age marriages and domestic violence in SBK

Early marriages are far more prevalent in Pakistan's rural areas than in its urban areas. In the aforementioned study it was found that 58 percent of rural females and 18 percent of rural males marry before reaching the age of 20, as compared to 27 percent of urban females and 5 percent of urban males.⁷ Alongside rural/urban differences in



early marriage trends, there are also significant variations in early marriage statistics between and across Pakistan's four provinces. In the available statistics, Sindh shows the highest percentage of early marriages in rural areas, with 72 percent of females and 26 percent of males in the selected sample, married before 20. Sindh also has a high percentage of females in urban areas married by 20, reaching 36 percent. Balochistan closely follows Sindh in terms of early rural marriages (22 percent of males and 63 percent of females married before 20), and has the highest percentage of urban early marriages, with 9 percent males and 56 percent females marrying before 20.

11 percent of ever married women aged 20-24 had a live birth before they were 18 years of age. Highest proportion of such women was noted in Kalat region and the lowest in Quetta. The women living in rural areas, those who were the poorest and uneducated were more likely to begin childbearing before of age 18 years compared to younger ever



married women; older women were more likely to begin childbearing at an early age. Higher percentage of women age 30-34 reported that they had a live birth before age 15 compared to all other age groups. The pattern however, was different in urban area where the highest proportion of women age 40-44 reported a live birth before age 15. Those reporting a live birth before age 18, the pattern were similar among urban and rural women of reproductive age.

Objectives of the session:

1. To sensitize teachers & students on harmful effects of early age marriages
2. To sensitize teachers & students on harmful effects of Domestic Violence

As per discussion with student they are very confuse and need more clarification on their issues and its resolution. Some of them understand the seriousness of the issue but confused about parents behaviour and their own role as they lack to convenience them. They need proper counselling. Parents need to be more mobilised to understand the issues of their children.

There is space to work for youth and they need counselling and guidance for their health and future career.

SNO	Activity	No of participants
1	Orientation & Consultative Meetings with Directorate Health	13
2	Meetings with Media Networks	60
3	Meeting with Like minded organizations	22
4	Meeting with Youth groups	47
5	Sensitization meetings with Provincial Health Minister	4
7	Formation of Pressure group	18
8	Meeting of Support/pressure group	61
9	Sensitization sessions on early age marriages	505
10	Sensitization sessions on domestic violence	510
Total		1240





Society for Mobilization Advocacy And Justice (SMAAJ)

Advocacy for Integrating Youth Friendly Health Protocols in Health policy

Pakistan is going through a time period of demographic dividend and currently has the largest cohort of young population in its history. The recent studies on young people report their increasing use of drugs, alcohol and tobacco, low self esteem, stress and mental ill health, low contraceptive prevalence, high abortion rate, and an upward trend in sexually transmitted infection (STIs) and HIV/AIDS.

In Balochistan, generally the health services have been provided through static health facilities like BHUs, SRHRCs and DHQs offering basic primary health care (PHC) services and to some extent basic and comprehensive EmOC services. Reproductive Health (SRHR) is recognized as a basic human right that applies to all, men, women, youth and adolescents. However, there is still an enormous gap in the provision of broadened Reproductive Health Care (SRHRC) in the areas of Emergency Obstetric Care (EmOC), family planning (FP), HIV/AIDS and Sexually Transmitted Infections (STIs), and Gender-based Violence (GBV). The shift of focus from primary health care to SRHR, the lack of financial, technical and community resources undoubtedly are impacting the communities living in Balochistan with low literacy levels, rigid tribal setups, and poor road infrastructure. Furthermore, key SRHR indicators for Balochistan are poorer in comparison to national estimates, reflecting low levels of awareness, gender disparities, poor capacity of service delivery system and also an unmet need for SRHR services amongst local populations.

Youth Demographics – Pakistan

- Pakistan currently has the largest group of youth (Ages 10 – 24) in its history with nearly 60 million individuals almost 60% of its total population
- About 41 Million are adolescents (10- 19)
- In 2025, the number of this age group will further increase to 64.8 Million
- 1200 young people start smoking every day, majority are adolescents
- 71% of addicts out of 5 million drug abusers in Pakistan are from the age of 20-30.
- 6 Children are abused every day in Pakistan
- 19.1 is the median age of first marriage (boys and girls) in Pakistan - 1 out of 6 women age 15-19 is already married.
- 65% of adolescents are unaware of these challenges and have limited access to basic information and health care
- 50% drop out of school after class V and 40% are malnourished
- 59.1% females and 30% males aged 15-24 have had no education ever!

It is imperative that youth friendly health services become a part of minimum standard delivery service and package that cater to young people's right to information and services related to their reproductive health and rights. Ideally, youth friendly health services should include a wide range of services with referral to specialists and specialized services such as,

- ✓ Information about youth friendly health services
- ✓ Counseling
- ✓ Adolescent development including feelings, body image relationships issues, adult-adolescent relationship, peer pressure, bullying, gender dynamics etc.
- ✓ Youth reproductive health issues including bodily changes, myths and misconceptions, around the issue
- ✓ Services for those who experiencing sexual, physical and emotional violence
- ✓ Pre and post natal care

Society for Mobilization Advocacy And Justice (SMAAJ)

- آنے والے نوجوانوں سے سہولیات کے بارے میں رائے لی جائے تاکہ اس بات کو یقینی بنایا جاسکے کہ سہولیات کا معیار بہتر ہے۔
- ایسا ماحول قائم کیا جائے جہاں پر کسی قسم کی رائے قائم کے بغیر ایک غیر جانبدار رویہ کیلئے یقیناتی کے وقت نسل کی صلاحیتوں کا اچھی طرح سے جائزہ لیا جائے۔
- فضل اور مشیر کے طور پر نوجوانوں کی یقیناتی پر بھی غور کیا جائے
- اس بات کو یقینی بنایا جائے کہ سہولیات مہیا کرنے والا ماحول اس بات پر یقین رکھتا ہو کہ نوجوانوں کو یہ حق حاصل ہے کہ وہ اپنی صحت کے بارے میں سہولیات کا انتخاب کریں اور اس کو حاصل کریں۔ اور نسل کو چاہے کہ وہ دوسروں کے بارے میں کسی قسم کی رائے قائم کے بغیر عزت دینے والا تعصب کے بغیر رویہ اپنائیں۔

تولیدی صحت کے بنیادی حقوق

- زندگی کا حق
- صحت کا حق
- Privacy اور Confidentiality کا حق
- آزادی کا حق
- برابری کا حق
- خیالات کی آزادی کا حق
- نقصان دہ دوسروں سے بچاؤ کا حق
- تشدد اور بیماریوں سے بچنے کا حق
- تشدد سے آزادی اور استحصال سے بچنے کا حق
- تعلیم اور معلومات کا حق
- صحت کی سہولیات اور تحفظ کا حق
- تشدد اور برے سلوک سے آزادی کا حق
- شراکت کا حق

نوجوانوں کی تولیدی صحت کی اہم سہولیات

- نوجوانوں کی تولیدی صحت کے حوالے سے معلومات کی فراہمی
- رہنمائی
- نوجوانوں کی ترقی جس میں ان کے احساسات، جسمانی حدود، تعلقات کے مسائل، بچوں اور بڑوں کے درمیان تعلقات، دوستوں کی صحبت کے اثرات، ہراساں ہونا، اور جنسی تفریق کے حوالے وغیرہ۔
- نوجوانوں کی تولیدی مسائل میں جسمانی تبدیلی، غلط فہمیاں وغیرہ شامل ہوں
- جنسی، جسمانی اور نفسیاتی تشدد کے نوجوانوں کے لیے اقدامات
- قبل و بعد از پیدائش سہولیات
- STI/HIV کے ٹیسٹ اور علاج کی سہولیات
- سہولت کی فراہمی ان جگہوں پر ہوں جہاں نوجوان آسانی سے رسائی حاصل کر سکیں۔
- سہولیات کی جگہوں پر نوجوانوں کیلئے پڑھنے کیلئے معلوماتی کتابچے دستیاب ہوں (مثلاً پاپرز، برشروٹ وغیرہ)۔
- سہولیات کی جگہوں میں انتظامات اس طرح کے ہوں کہ جہاں نوجوانوں کو نا اہل قرار دیا جائے اور باہر سے بھی محفوظ ہوں۔
- سہولیات مہیا کرنے کے اوقات سکول اور کالج کے اوقات کے بعد ہوں
- سہولیات مہیا کرنے کی جگہوں پر پرائیویسی کا خاص خیال رکھا جائے اور اس بات کو یقینی بنایا جائے کہ رہنمائی دیتے وقت نہی کوئی دیکھے اور نہ ہی سن سکے۔
- سہولیات یا تو مفت ہوں اور اگر ممکن نہ ہو تو تھیں اتنی ہو کہ نوجوان ادا کر سکیں۔
- سہولیات کی جگہ ایسی ہوں کہ باہر اور دوسروں سے محفوظ ہو جہاں پینے کا پانی دستیاب ہو۔
- مردوں اور عورتوں کی رہنمائی کیلئے الگ الگ جگہ تھیں ہوں جہاں پر واضح طور پر تحریر ہو۔

پاکستان میں نوجوانوں کی موجودہ صورتحال

موجودہ تحقیق کے مطابق نوجوانوں میں نسلے کا بڑھنا ہوا اور خانہ جنس میں غیر ممنوعہ ادویات، شراب نوشی، ذہنی دباؤ، جسمانی اور ذہنی بیماریاں شامل ہیں۔ پاکستان میں اس وقت نوجوانوں کی تعداد سے زیادہ ہے۔ (عمر 10 سے 24 سال) اور یہ تعداد ٹوٹل آبادی کا 60% فیصد ہے۔ تقریباً Adolescent 41 Million ہیں جن کی عمریں (10 سے 19 سال) ہیں۔ 2025 میں ان کی تعداد 64.8 Million کا اضافہ ہوگا۔ 1200 نوجوان جو روزانہ سہا کو نوشی کا آغاز کرتے ہیں جن میں اکثریت کی تعداد Adolescent یعنی Teen ager ہے۔ 5 Million میں 71% فیصد ایسے ہیں جو نشہ کرتے ہیں جن کی عمر (20 سے 30 سال) ہے۔ جبکہ 6 بچوں کو روزانہ تشدد کا سامنا کرنا پڑتا ہے۔ پاکستان میں 11.9% ایسے نوجوان لڑکے اور لڑکیاں ہیں جو Medium Age میں پھیلنا شروع کرتے ہیں۔

ہر 6 خواتین میں سے 1 خاتون (15 سے 19 سال) کی عمر میں شادی شدہ ہے۔ 65% فیصد نوجوانوں میں جن کو ان Challenges کا پتہ ہی نہیں ہے۔ 50% فیصد ایسے بچے ہیں جو پانچویں جماعت کے بعد اسکول چھوڑ جاتے ہیں۔ 40% فیصد بچوں کو خوراک کی کمی کا سامنا ہے۔ 59.1% فیصد خواتین اور 30% فیصد مرد (15 سے 24 سال) نے کبھی تعلیم حاصل نہیں کی۔ نوجوانوں میں عمر کے بڑھنے کے ساتھ ساتھ کسی قسم کی جسمانی، ذہنی، اور نفسیاتی تبدیلیاں اور پیچیدگیاں رونما ہوتی ہیں اور ان مسائل کے تدارک کے لیے رہنمائی کے ساتھ ساتھ مناسب اور آسانی سے دستیاب صحت کی سہولیات کی فراہمی انتہائی ضروری ہے۔

یہ بہت اہم ہے کہ نوجوانوں کی صحت کو اہم سمجھتے ہوئے ان کی صحت کی بنیادی ضروریات کو مد نظر رکھا جائے تاکہ ان کو جسمانی، ذہنی اور نفسیاتی پیچیدگیوں کا سامنا نہ کرنا پڑے

پروان Parwan

Youth Friendly Health Services in Health Protocols

Society for Mobilization Advocacy and Justice SMAAJ



- قوم جنس کی شناخت، جنسی رجحانات، ازدواجی حیثیت، عمر، مذہب، سیاسی وابستگی، لسانی اور جسمانی معذوری کو خاطر میں نہ لاتے ہوئے سہولیات تک رسائی اور حق
- قانون کی نظر میں بحیثیت انسان شناخت کا حق

حکومت

برہمنی عمر کے ساتھ جنسی، ذہنی، نفسیاتی مسائل کے حل کے لیے صحت کی مناسب سہولیات کی فراہمی حکومت وقت کی ذمہ داری ہے اور حکومت کو اس سلسلے میں اپنا پورا کردار ادا کرنا چاہیے کیونکہ یہی نوجوان ہمارا مستقبل ہیں جنہوں نے ملک کی باگ دوشیہائی ہے لہذا ضروری ہے کہ نوجوانوں کے ان مسائل کے حل کیلئے ترقیاتی بنیادوں پر صحت کی سہولیات کو یقینی بنایا جائے۔

میڈیا

میڈیا کا کردار کسی بھی معاشرے میں ایک کلیدی حیثیت کا حامل ہوتا ہے جو کہ معاشرے میں شعور آگے کے حوالے سے نہایت اہم ہوتا ہے۔ اسی کردار کی اہمیت کو سامنے رکھے ہوئے نوجوانوں کی جنسی، جسمانی، اور نفسیاتی مسائل کے لیے معاشرے میں آگہی پیدا کرنی چاہیے۔ میڈیا نوجوانوں کیلئے پروگرام، شعور اور آگہی کیلئے زیادہ سے زیادہ تشہیر کریں۔ کیونکہ اس وقت نوجوان میڈیا کو زیادہ سے زیادہ دیکھتے اور سنتے ہیں۔

غیر سرکاری ادارے اور نوجوان

غیر سرکاری تنظیموں کا کردار بھی نوجوانوں کو جنسی، نفسیاتی اور جسمانی صحت کے حوالے سے رہنمائی اور سہولیات کی فراہمی کے حوالے سے مثبت اہمیت کا حامل ہے۔ کیونکہ ان تنظیموں کی رسائی پبلک سطح تک ہوتی ہے لہذا انہیں چاہیے کہ وہ شعور آگہی اور سہولیات کی فراہمی کے ساتھ ساتھ سرکار کے ذریعے حکومت سے مطلوب سہولیات کی فراہمی کے لیے عہدہ چھوڑیں۔ اور اسی طرح نوجوانوں کو اپنے سہولت کیلئے اپنی صحت کا خیال رکھنا ہوگا تاکہ وہ اپنے خاندان اور اس ملک کی ترقی میں فعال کردار ادا کر سکیں۔

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Press release



