THE SEXUAL AND REPRODUCTIVE HEALTH NEEDS OF YOUNG PEOPLE WITH DIVERSE SEXUAL ORIENTATION AND GENDER IDENTITY/EXPRESSION

Throughout the Asia and Pacific region, **young people with diverse sexual orientation and gender identity or expression (SOGI/E) experience a high burden of poor sexual and reproductive health (SRH).** Much of the data and evidence of SRH needs among this population are limited to young men who have sex with men, and young transgender women, with very little information available about the SRH needs of young lesbian and bisexual women, transgender men, intersex young people, or young people with other non-cis/non-binary gender identity/expression.

This group may face a disproportionate burden of:

HIV: Young men who have sex with men, and young transgender people, experience a disproportionate burden of HIV;

Intimate partner violence: Rates of physical intimate partner violence, sexual violence and coercion are high among young people with diverse SOGI/E;
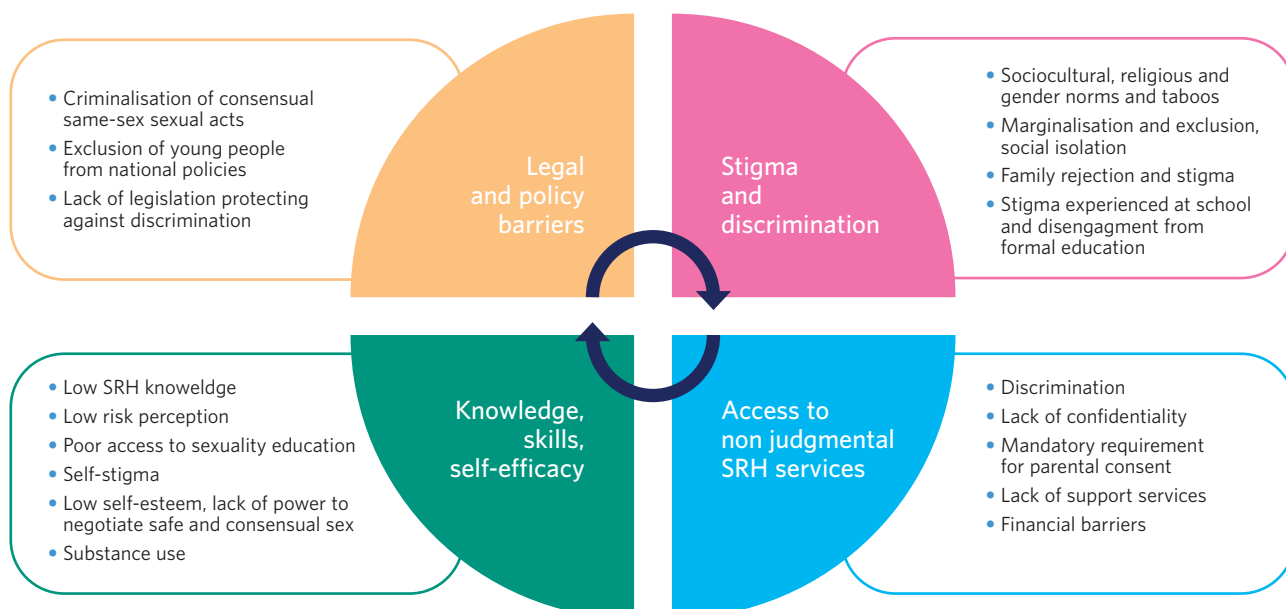
Psychological distress: Young people with diverse SOGI/E report high rates of psychological distress.

WHAT MAKES THIS GROUP VULNERABLE TO POOR SEXUAL AND REPRODUCTIVE HEALTH OUTCOMES AND OTHER HEALTH ISSUES?

Young people with diverse SOGI/E often experience considerable barriers to accessing quality health services and are largely neglected by existing adolescent health, SRH, and HIV policies and strategies in the region.

COMMON DETERMINANTS OF POOR SRH AMONG YOUNG PEOPLE WITH DIVERSE SOGI/E

Legal and policy barriers
- Criminalisation of consensual same-sex sexual acts
- Exclusion of young people from national policies
- Lack of legislation protecting against discrimination

Stigma and discrimination
- Sociocultural, religious and gender norms and taboos
- Marginalisation and exclusion, social isolation
- Family rejection and stigma
- Stigma experienced at school and disengagment from formal education

Knowledge, skills, self-efficacy
- Low SRH knowledge
- Low risk perception
- Poor access to sexuality education
- Self-stigma
- Low self-esteem, lack of power to negotiate safe and consensual sex
- Substance use

Access to non judgmental SRH services
- Discrimination
- Lack of confidentiality
- Mandatory requirement for parental consent
- Lack of support services
- Financial barriers

Non-conformity with rigid, conservative gender and sexual norms, as well as cultural and religious beliefs and taboos, mean that these young people are faced with the double stigma associated with both premarital sexual activity and engaging in behaviours that may be highly taboo or criminalised.

Many young people lack access to comprehensive sexuality education either because they are not engaged with formal education, and/or programmes are predominantly heteronormative and do not adequately address the needs of young people with diverse SOGI/E.

▶ **15** **countries out of the 32** low and middle income countries in Asia and the Pacific currently criminalise consensual same-sex sexual acts between men.

▶ **10** **countries** criminalise same-sex sexual acts between women.

▶ **Three** **countries** have punitive laws that persecute transgender people and related behaviour.

▶ **Many** **countries that do not criminalise consensual** same-sex relations still lack legislation prohibiting discrimination on the basis of sexual orientation or gender identity.

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I was bullied by ninth grade boys when I was in fifth grade. They teased me and dragged me to a room and tried to take my clothes off. I fought my way out.

Young transgender person, Thailand

"
We hope SRH services could be completely confidential and the service providers will not overestimate the personal life of the patient, and treat young people equally.

Young person, China

"
The material in the [school sexuality education] module shouldn't be biased towards just one sexual orientation. So far the material is still very cisgender-biased and there's no room for conversations about transgender.

23-year-old man, Indonesia

TAKE ACTION

✓ Introduce legislation that protects young people with diverse SOGI/E from discrimination and create an enabling environment that includes young people with diverse SOGI/E in national policy and strategic plans related to adolescent health, SRH, and HIV by removing regulatory and legislative barriers.

✓ Use multiple channels to reach young people peer-led, such as outreach, digital media, mass media and other community-engagement strategies to address stigma and discrimination.

✓ Improve access to and quality of school-based sexuality education to better address SOGI/E, diversity, stigma.

✓ Ensure 'one-stop' health centres provide comprehensive, non-judgmental services that extend beyond HIV testing to address other SRH needs and risks and improve continuity of care.

✓ Strengthen data and research to inform policies and programmes.