

Adolescent and Youth Situation Analysis

Lao People's Democratic Republic

"Investing in young people is investing in the future"

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Acronyms / Abbreviations

ADRA	Adventist Development and Relief Agency
AIDS	Acquired immunodeficiency syndrome
ASEAN	The Association of Southeast Asian Nations
ASRH	Adolescent sexual and reproductive health
AUD	Australian dollars
AUSAID	Australian Government Overseas Aid Program
AYSA	Adolescent and Youth Situation Analysis
BI	Burnet Institute
BCC	Behaviour change communication
CAD	Canadian dollars
CCO	Career counselling office
CCU	Consistent Condom Use
CHAS	Centre for HIV/AIDS/STIs
CRC	The United Nations Convention on the Rights of the Child
CSE	Comprehensive Sexuality Education
CSO	Civil Society Organisation
DIC	Drop-in centre
DPPE	Department of Pre-school and Primary Education
DREC	Disaster Risk Reduction for Children (project)
DRR	Disaster Risk Reduction
EU	European Union
FGD	Focus Group Discussion
GBV	Gender-based violence
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
GSHS	Global Student Health Survey
HIV	Human immunodeficiency virus
IBBS	Integrated Behavioural and Biological Surveillance
ICPD	International Conference on Population and Development
ICPD PoA	International Conference on Population and Development Programme of Action Plan
IEC	Information, Education, Communication
ILO	International Labour Organisation
INGO	International Non-Governmental Organisation
IOM	International Organisation for Migration
JICA	Japan International Cooperation Agency
KAP	Knowledge, attitudes and practices
KII	Key Informant Interviews
Lao-ITECC	International Trade Exhibition and Convention Centre in Vientiane Capital, Lao PDR
Lao PDR	Lao People's Democratic Republic
LaoPHA	Lao Positive Health Association
LCDC	Lao National Commission for Drugs Control and Supervision
LDC	Least Developed Country Status
LGBT	Lesbian, Gay, Bisexual and Transgender
LPRYU	Lao People's Revolutionary Youth Union
LSIS	Lao Social Indicator Survey
LWU	Lao Women's Union
LYU	Lao People's Revolutionary Youth Union
MCH	Maternal and Child Health
M&E	Monitoring and evaluation
MDGs	Millennium Development Goals
MoES	Ministry of Education and Sports
MoH	Ministry of Health

MoHA	Ministry of Home Affairs
MoICT	Ministry of Information, Culture and Tourism
MoJ	Ministry of Justice
MoLSW	Ministry of Labour and Social Welfare
MoPWT	Ministry of Public Works and Transport
MoU	Memorandum of Understanding
MPI	Ministry of Planning and Investment
MoPS	Ministry of Public Security
MSM	Men who have sex with men
MtF	Male to Female (transgender)
NCD	Non-Communicable Disease
NERI	National Economic Research Institute
NGO	Non-governmental Organisation
NIOPH	National Institute of Public Health
NORAD	Norwegian Agency for Development Cooperation
NPA	Non-profit association
NTO	National Technical Organisation
NYP	Network of Young People
NZMFAT	New Zealand Ministry of Foreign Affairs and Trade
PCCA	Provincial Committee for the Control of AIDS
PPG	Peer protection groups
PPR	Programme and policy review
PSI	Population Services International
RIES	Research Institute for Education and Sport
ROR	Rural off-Road
SC	AYSA Steering Committee
SCF	Save the Children Fund
SEAMO	Southeast Asian Ministers of Education Organisation
SRH	Sexual and reproductive health
SRHR	Sexual and reproductive health and rights
SSEAYP	Ship for Southeast Asian Youth Programme
STEPS	Supporting Talent Entrepreneurial Potential
STI	Sexually transmitted infections
TraC	Tracking Results Continuously (report)
TVET	Technical Vocational Education and Training
TWG	AYSA Technical Working Group
UN	United Nations
UNESCO	United Nations Educational, Scientific and Cultural Organisation
UNFPA	United Nations Population Fund
UNIAP	United Nations Inter-Agency Project on Human Trafficking
UNICEF	United Nations Children's Fund
UNODC	United Nations Office on Drugs and Crime
USAID	United States Agency for International Development
USD	United States dollars
UXO	Unexploded Ordnance
WHO	World Health Organisation
WIFS	Weekly Iron Folate Supplementation
WRA	Women of Reproductive Age
YEAL	Young Entrepreneurs Association of Laos
YPN	AYSA Young People's Network

Foreword

With nearly 60% of the population below the age of 25 years and more than 30% of the population between 10 and 24 years, young people constitute a large proportion of the Lao People's Democratic Republic's (Lao PDR) population. Clearly, addressing the needs of young people means addressing the needs of Lao PDR as a country, which brings with it both enormous opportunities and challenges now and for the future of this country.

Lao PDR has made significant progress towards achieving the Millennium Development Goals (MDGs) in 2015 and aims to achieve the national goal of graduating from least developed country (LDC) status by 2020. Young people have a significant role to play in achieving this goal.

This is the first time that the Adolescent and Youth Situation Analysis (AYSA) has been conducted in Lao PDR. It gathers available data on adolescent and young people and provides an up-to-date review of existing policies and legislation to enhance current and future programmes for young people. It should be seen as the first step to assist the Government, international organisations and youth themselves to develop and improve wide-ranging and inclusive programmes and policies which can effectively address the specific needs of young people in the areas of health, education, employment, protection and participation; including the Education, Health, Labour and Social Welfare, sectoral 5-year plans, the National Socio-Economic Development Plan (NSED) and the National Youth Development Strategy of the Lao People's Revolutionary Youth Union (LPRYU/LYU).

The findings and recommendations from this report are expected to guide further interventions and draw specific attention to the importance of an increased investment in young people with the ultimate goal of improving the lives of young people and with it the social, economic and cultural development of the whole country.



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Executive Summary

This AYSA report focuses on young people aged 10-24 years. It was carried out in order to better understand the lives of young people in Lao PDR and the factors that are affecting them, both positively and negatively, with the aim of identifying priority areas for action that would improve their lives and contribute to the social and economic development of the country, now and in the future.

Lao PDR is a landlocked country in South-East Asia with an ethnically diverse population (49 distinct ethnic groups). Ethnic Lao comprise 52.5% of the total population and predominantly inhabit the lowland areas along the Mekong River. Although there has been increasing rural-to-urban migration, 68% of the population still lives in rural areas.

In 2011 Lao PDR moved from its former lower income status level to a 'lower-middle income economy'. This development shows that the country "is on track to achieve its long term vision: to graduate from the Least Developed Country status by 2020".¹ As a member of the Association of Southeast Asian Nations (ASEAN), Lao PDR "is increasing its integration into the regional and global economy".² However, despite a high economic growth rate in Lao PDR due to the country's rich natural resources, 27.6% of the population was still living below the national poverty line (2007/2008).³

Lao PDR has a young population, with 60% of its over 6 million inhabitants estimated to be under 25 years of age. Such a young population represents a unique opportunity from which the country could benefit. Increasing investments in human capital development, particularly in the areas of education, health, employment, protection and participation will ensure that every young person's potential is fulfilled.

The AYSA focused on these five key areas of young people's lives: health, education, employment, protection and participation. It reviews and synthesizes available data pertaining to young people, provides the views of young people and the significant adults in their lives, draws conclusions and identifies gaps that need to be addressed.

The data for the AYSA were obtained from a number of different sources: a review of existing policies, laws and strategies of relevance to young people, to explore coverage, consistency, gaps and lessons learned; a secondary analysis of available quantitative and qualitative data describing the situation of young people; a review of programmes and projects implemented for young people, in order to assess their focus and coverage, and identify lessons learned; and the collection and analysis of primary data through focus group discussions (FGDs), carried out with young people, parents and village authorities, and key informant interviews (KIIs) with a range of people responsible for planning and implementing policies and programmes directed to young people.

¹ The World Bank (2014). *Lao PDR Overview*, <http://www.worldbank.org/en/country/lao/overview>.

² Ibid.

³ Government of the Lao PDR and the United Nations (2013). *The Millennium Development Goals. Progress Report for the Lao PDR 2013*, p. 19.

The situation of Adolescents and Youth in Lao PDR

The data from the AYSA indicate that many young people are healthy, going to school, finding time for leisure activities and contributing in many ways to their families and communities. But many are not, suffering poor health, lack of access to education, hazardous work conditions and situations that undermine their rights to survival and development.

The majority of the population is young, with 60% of the over 6 million inhabitants estimated to be under 25 years of age, with an equal number of males and females. 70% of the young population resides in rural areas with the largest number in the major provinces of Savannakhet, Vientiane and Champasak. Ethnically, 52.5% are Lao. More young women than men aged 15-19 [19% vs 6%] and 20-24 years [59% vs 36%] were married. Early marriage is still common in Lao PDR. The median age at first marriage among women age 25-49 years is 19.2 years which has been relatively unchanged over the past two decades. The proportion of young people that is married is strongly correlated to their level of education and their wealth quintile. A smaller proportion of urban youth are married when compared to rural youth, and early marriage is more common in some ethnic groups.

Lao PDR has one of the highest adolescent birth rates in the region, 94 births per 1000 girls (age 15-19), with distinct differences between rural and urban areas (114 and 44 births per 1,000 adolescents, respectively).

With regard to education, the net enrolment rate for primary school is 95.2% of youth. Literacy rates are slightly higher for those in the 15-19 years age group than those in the 20-24 year age group, and the literacy rates of young women aged 15-24 years are lower than their male counterparts, 69% and 77% respectively, and girls from some ethnic communities and lower wealth quintiles are at an educational disadvantage.

The labour force participation of young people living in this country is high. For young people aged 15-19 years it was 48.9% and 83.7% for 20-24 year olds. The percentage of currently employed females is higher than the percentage of currently employed males in the 15-24 year age group. Unemployment rates in this group are higher than among their older counterparts and much higher in the urban areas. The unemployment rates for young people aged 15-24 years are 2.5% for women and 3.5% for men.

Health

The rapid development and economic growth has an impact on young people's health in many ways. Cultural and societal transformation influences risk behaviours, the motivation of youth who engage in them and capacity to deal with risk situations. The opportunity for migrant work increases exposure to infectious diseases for young migrants, and other health risks, such drug abuse (in particular methamphetamine, or yabaa), and injuries from road accidents.

The use of drugs appears to be spreading throughout the country, for diverse reasons. Yabba is used to facilitate work in rural communities but for recreation in urban settings. The increased consumption of alcohol among young people which is seen as acceptable by society has created serious risks for their health and lives.

Early child bearing is not perceived as unusual and therefore Lao PDR has the highest adolescent pregnancy rates in the region. Risk-taking sexual behaviours, including low condom use and multiple sexual partners, are prevalent amongst young people, particularly amongst adolescents from certain minority ethnic groups. Condoms are not commonly used between young men and women other than service women, thus resulting in unwanted pregnancy and illegal abortions, for which data is limited.

While HIV prevalence in the general population is low, with rates estimated at 0.2%⁴, high-risk behaviours for HIV are common, and rapid economic growth, social change and geographical location may precipitate increases in HIV. Despite its rare occurrence in Lao PDR, 80% of young people aged 15-19 years, report having heard about HIV/AIDS, although levels of comprehensive knowledge about HIV-transmission are low, with two studies demonstrating that less than one quarter of young people aged 15-19 years had a comprehensive knowledge about HIV/AIDS.^{5,6}

Although reported rates of HIV are low, the prevalence of sexually transmitted infections (STIs) is high, including chlamydia and gonorrhoea.⁷ In urban settings there is greater access to information about STIs, but for a variety of reasons young people do not adopt safe sex practices. In rural settings, and particularly in rural-off road settings, the lack of sexual and reproductive health knowledge and poor access to condoms and other forms of contraception contributed strongly to both unplanned pregnancy, and to STIs. In addition to the direct morbidity associated with these infections, STIs may increase the transmission and susceptibility to HIV infection.

Lack of or limited access to adolescent and youth-friendly sexual and reproductive health counselling and limited information and services for both, married and unmarried young people, cost of services, the attitudes of health workers, self-censorship, fear of social stigma and the perceived lack of confidentiality discourage youth to seek health services and information they need.

Continued effort to reduce disparities in access to health services by different groups of young people is needed. Not only the health sector but all sectors have important roles to play to increase advocacy and awareness for health education programmes for young people at all levels for example by incorporating 'life skills' education into national core curricula in schools.

Education

Lao PDR has made remarkable progress in the area of education for its population through various progressive policies, plans and programmes. Gender disparities in primary education have been significantly reduced. Education is highly valued among young people, their parents and the authorities.

Despite the progress, disparities still exist along with challenges related to educational quality, efficiency and access. There are many obstacles to young people staying at school including financial and parental support. Gender disparities in secondary education in rural and ethnic communities remain.

A higher education is seen as more valuable than obtaining vocational skills. However, at the same time, due to the mis-match of education and employment opportunities available, young people feel that their education did not prepare them in the ways they had hoped. Young people, parents and authorities who participated in the primary data collection mentioned the association between the inability of young people to continue higher education and obtain employment with lack of enabling connections.

There is a need for strong linkages between education and employment sectors to ensure that all young people, regardless of gender, disability or ethnicity are able to benefit from the growing opportunities that will arise in the country. To accomplish this, the school-to-work transition must be effective.

⁴ Centre for HIV/AIDS/STI (CHAS) (2012). *Global AIDS Response Progress (GARP)- Country Report, Lao PDR*.

⁵ Unicef and MoE (2009). *Assessment Life-Skills Based Curriculum Project in Lao PDR. Scaling up the response for Children*.

⁶ Thanavanh B, Harun-Or-Rashid M, Kasuya H, Sakamoto J. (2013). *Knowledge, attitudes and practices regarding HIV/AIDS among male high school students in Lao People's Democratic Republic: J Int AIDS Soc.*,16: p.17387.

⁷ Ibid.

Employment

Employment opportunities vary significantly between urban and rural and off-road locations, and between boys and girls. The skills of young people are often not suited to the types of work available, and young people have access to limited information on employment opportunities. Youth employment is dominated by low-skills, low paid, low-productivity, and unremunerated work. Many of the more traditional employment opportunities, such as subsistence farming do not provide young people with opportunities to move out of the poverty cycle.

Increasing numbers of young and unmarried people in particular girls are migrating within and outside the country. However, they often do not have adequate safeguards for their health and legal status requirements.

It is important to consider the opportunities and abilities of Lao young people in the context of the broader ASEAN community to ensure they are competitive within the region. An enabling environment including employment policies that provide access to job-based training, and incentives for employing vulnerable populations is crucial to ensure sustainable economic development of the country.

Protection and Vulnerability

There are many protection issues that increase young people's vulnerability and undermine their rights to health, education and development including early marriage, ethnicity, gender, violence, trafficking, and substance use.

Some groups of young people are particularly vulnerable – their rights to health and education are least likely to be protected, respected and fulfilled. Many of these groups have been identified in the situation analysis: young people living with disabilities, Lesbian, Gay, Bisexual and Transgender (LGBT) youth, child labourers, young migrants, unemployed urban youth, key populations (transgender youth, men who have sex with men, young women engaged in the entertainment and sex industries), pregnant adolescent girls particularly unmarried girls, drug users and those at risk of initiating drug use, female youth in off-road communities, poor youth in rural areas and young people in certain ethnic groups.

The changes that are taking place in Lao PDR are not affecting all young people equally or in the same ways. It will therefore be important to ensure that some groups of young people are not excluded. Adopting a rights-based approach to the development, implementation and monitoring of interventions can help to maintain a focus on equity, including the systematic implementation and review of the Concluding Observations of the Committee on the Rights of the Child, the Committee on the Elimination of All Forms of Discrimination against Women, and the Committee on the Rights of Persons with Disabilities.

Participation

Young people and authorities may see the concept of participation differently. Participation was often referred to as the engagement of young people in the village activities and festivities as part of building solidarity within their communities.

Young people rarely have the opportunity to contribute to decisions that are taken about their lives at any level. The voices of urban and rural youth are not yet incorporated into local or national development planning. There are a number of challenges and limitations for their participation including no representative for youth, limited opportunities for engagement, perceptions of authorities and parents on the role of young people and limited forums for expression. Without representation from organisations, such as LYU, there is really no "seat at the table" for young people in Lao PDR.

Policy situation

In general, there is a positive policy environment for young people in Lao PDR, although some specific areas that require further development are highlighted in the AYSA (for example, young people and alcohol consumption and places of entertainment). However, there is currently no comprehensive national policy for young people in Lao PDR that makes the linkages between the different sectoral policies and laws that exist.

Young people need to be aware of the laws and policies that both govern and protect them; they need to know their rights in relation to health, education and employment. Without an awareness of the protections afforded them by law they are vulnerable to exploitation and abuse, and may not seek help from the authorities when appropriate. At the same time, duty bearers also need to know and understand the implications of existing laws and policies as these relate to young people.

Policies are only as good their implementation. There were concerns expressed from many of the people who contributed to the AYSA that while policies exist to protect young people, the implementation, enforcement and monitoring of these policies and laws is often weak.

Programme situation

The factors that affect young people's health and development work at many levels: individual; families and friends; infrastructure, including the coverage and quality of health services and schools; policies and legislation, social values and norms. It is of course important to direct interventions to young people, for example to ensure that they have access to information (for their health, to know what opportunities are available in terms of training or employment), to develop skills (including life skills, financial literacy and livelihood skills), and to access health and other services. But it is also important to ensure that the capacity of duty bearers is strengthened (e.g. service providers, parents, teachers), and that in addition to policies and legislation, social values and norms are supportive and responsive to the needs and rights of young people, for example, early marriage and early childbearing.

There appear to be relatively few programmes being supported in Lao PDR that are targeted specifically to young people, although a number of programmes directed to the general population also reach this segment. Programmes that are directed to young people, are dependent on external funding – while this provides opportunities for experimentation and flexibility, there is a lack of sustainability, even when such programmes work through partnerships with the government or local organisations. Many programmes only operate on a small scale, either in terms of geographical coverage or a limited number of beneficiaries, and they lack systems for monitoring and evaluation, which make it difficult to assess their effectiveness.

Policy and programme development for young people cannot be seen outside the development of policies and strategies that apply to the population in general. However, all policies, strategies and programmes should take into consideration the specific needs and requirements of young people, and when they are developed they need to be reviewed through a “young people's lens” and, to this end, ensure the participation of young people.

Multi-sectoral collaboration

Because of the range of determinants that affect young people's lives, partners from various sectors will need to work together to improve the health, education and development of young people, and maximize their potential to contribute now and in the future. There need to be strong linkages between health, education, employment, protection and participation in contributing to the future of young people in Lao PDR.

At the present time, there is no functioning mechanism for facilitating inter-sectoral collaboration. While young people are included in some of the sectoral strategies, sometimes more implicitly than explicitly, there is no overall strategy for young people in the country. Consideration therefore needs to be given to initiating or rejuvenating fora at national and community levels for bringing together the different actors who need to contribute to the health, development and wellbeing of young people.

In addition, it may also be beneficial to develop a national strategy that builds on the AYSA findings and strengthens collaboration and potential synergies around clearly defined goals and targets. To this end, consideration could be given to using this AYSA report as the basis for a national consensus meeting and advocacy event, to define short and long-term priorities for action, and to agree on goals, targets and processes for collaboration.



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I Introduction

1.1 Background and Rationale

Young people (10-24 years) in Lao PDR are at the heart of the present and future development of the country: in the short term for achieving the MDGs, and in the longer term for ensuring that the country is able to take full advantage of the myriad economic opportunities linked to the forthcoming ASEAN integration, and achieving the national goal of graduating from an LDC status by 2020.

There is an important potential demographic dividend in Lao PDR, in terms of current fertility rates and the dependency ratio, which will continue over several decades. As the cohorts of young people move up the population pyramid, their health, education, skills and overall development are likely to have profound effects on the future potential and capacity of the adult population to contribute to the social and economic prosperity and stability of the country.

It is now widely recognized that adolescence is a key period in the life-course for public health, and that young people's physical, mental and social development is crucial for making positive transitions from childhood to adulthood, for assuming adult roles and responsibilities.^{8,9,10} What happens during the adolescent years has important implications not only for their health in the present, but also for their health and capacity as adults, and even for the health of their children.¹¹ Positive transitions to adulthood are essential for the future health and prosperity of individuals, families and communities, to family formation, to employment and to taking responsible decisions.

It is known that many factors affect the rapid physical, psychosocial and emotional changes that take place during the second decade of life, factors both internal to young people (for example their nutrition or the development of high risk behaviours such as alcohol use), and also factors external to them.¹² Not only are young people changing rapidly but so is the environment in which they live, learn and earn. Everywhere, and at almost every level of society in Lao PDR, change is underway. The infrastructure of the country is developing, for example roads, schools, health facilities, clean water; traditional lifestyles, attitudes and values are changing and being challenged; young people are migrating to cities, mobile telephone and the internet have more and more penetration; new opportunities are opening up in profusion but so are a number of risks and dangers that can threaten their well-being, many of which were not experienced by their parents.

Focusing on young people will be essential for the achievement and sustainability of many of the MDGs and for the developing Beyond 2014 International Conference on Population and Development (ICPD) agenda and the post-2015 agenda; for achieving the unfinished agendas, for example sexual and reproductive health and rights (SRHR), including HIV, and for responding to new agendas such as non-communicable diseases (NCDs), mental health and injuries; the behaviours that underlie NCDs mostly start during adolescence and youth, and it is estimated that 75% of mental illness first manifests itself before the age of 25 years.¹³

⁸ WHO (2014): *Health for the world's adolescents – a second chance in the second decade*, <http://apps.who.int/adolescent/second-decade/>.

⁹ Kessler RC et al. (2005). *Lifetime prevalence and age-of-onset distributions of dsm-iv disorders in the national comorbidity survey replication*: Archives of General Psychiatry, 62(6): p.593-602.

¹⁰ WHO (2011): *Controlling NCDs: protecting health promoting development*, http://www.who.int/nmh/events/2011/ncds_booklet_2011.pdf?ua=1.

¹¹ WHO (2012): *Preconception care to reduce maternal and childhood mortality and morbidity, meeting report*, http://www.who.int/maternal_child_adolescent/documents/concensus_preconception_care/en/.

¹² WHO (2014): *Health for the world's adolescents – a second chance in the second decade*, <http://apps.who.int/adolescent/second-decade/>.

¹³ Kessler RC et al. (2005). *Lifetime prevalence and age-of-onset distributions of dsm-iv disorders in the national comorbidity survey replication*: Archives of General Psychiatry, 62(6): p.593-602.

Young people have shown themselves in many contexts to be a powerful force for change, for highlighting social injustice and negative factors in their physical and social environments. Lao PDR needs to be able to benefit from the assets and ideas that young people can bring to solving a range of challenges facing the country. A major challenge therefore is to ensure that young people are able to take advantage of the opportunities that surround them and take the risks that are an inherent aspect of their development; while at the same time being protected from the dangers and the high risk-behaviours that will undermine their health and capacities in the present and the future.

In order for this to happen it is important to give adequate attention to their health, education, skills and opportunities for decent work, protection from exploitation and abuse, and space to participate in decisions that affect their lives.

Finally it needs to be recognized that the changes that are taking place are not affecting all young people equally or in the same ways – many factors will affect this, including gender, educational attainment, economic status, domicile, ethnicity, disability and lack of parental guidance and support. It will therefore be very important to ensure that some groups of young people are not left out, that disparities are avoided as much as possible, and that equity and human rights, and a focus on the most disadvantaged and vulnerable young people are built into the policies and programmes that are developed for this segment of the population.

1.2 Defining the concept of young people

This situation analysis focuses on young people, combining adolescents (10-19 years) and younger youth (20-24 years). It does not include a focus on all youth as defined in Lao PDR (15-34 years) as it was decided in early discussions that an already ambitious situation report would become over-extended were it to include the 24-34 year age group, who are often quite different from young people in terms of their development, capacities, social transitions, aspirations, expectations, roles and responsibilities.

1.3 A demographic profile of young people in Lao PDR

Lao PDR is a landlocked country in South-East Asia. There are 49 distinct ethnic groups in the country, with ethnic Lao comprising 52.5% of the total population.¹⁴ The country is topographically separated into lowland areas along the Mekong River and highland areas. The majority of the population lives in rural areas, but with rural-to-urban migration, this population decreased from 72.9% to 68.0% between 2005 and 2009.¹⁵

As a nation, Lao PDR has a young population (see Annex 3). Out of its over 6 million inhabitants, 60% are estimated to be under 25 years of age.¹⁶ According to the 2012 Lao Social Indicator Survey (LSIS)¹⁷, 13% of the population is aged 10-14 years; 10% is aged 15-19 years; and 7.7% is aged 20-24 years (see figure 1 under point 6, Annex 3). The population pyramid highlights the important demographic changes that are already taking place that will have implications for the demographic dividend over the next 30 years.

It is also of note that in Lao PDR the migrant population is younger than the non-migrant population. Of the population aged over 10 years that migrated inter-provincially between the 1995 and 2005 censuses, 11.5% were aged 10-14 years, and a further 42% were aged 15-24 years.¹⁸ In both the 10-14 and 15-24 age groups, females formed a slightly larger proportion of the migrant population than males (in all other age groups, the proportion of females is lower than that of males).¹⁹

¹⁴ WHO (publication date unknown). *Health of adolescents in Lao PDR*.

¹⁵ Population census (2005).

¹⁶ Ibid.

¹⁷ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.

¹⁸ Ministry of Planning and Investment (2011). *Internal Migration in the Lao People's Democratic Republic. An Exploratory Study*.

¹⁹ Ibid.

A 2007 study of adolescent migrants in the Mekong sub-region found that the main factors drawing adolescents to migrate away from their rural communities into large cities such as Vientiane are their desire to escape from poverty, the chance for higher educational opportunities and better job opportunities, and the freedom to explore and choose new lifestyles.²⁰ This study also found that adolescent migrants had limited knowledge about and access to reproductive health information and services. Particular obstacles in accessing health facilities included: transportation, the need for companionship (someone to go with them) and cost.

People in Lao PDR tend to marry young. This is particularly true of young women, amongst who the median age at first marriage is 19.2 years. The legal age to marry is 18 for both males and females, but the Family Law of 1990 states that the age can be lowered to 15 “in special and necessary cases”.

The LSIS found that, of those respondents aged 20-24 at the time of interview²¹:

- 8.9% of females and 2.6% of males were married by age 15;
- 35.4% of females and 12.7% of males were married by age 18;
- 56.0% of females and 27.1% of males were married by age 20.

The proportion of young people that is married is strongly correlated to their level of education and their wealth quintile. A smaller proportion of urban youth are married when compared to rural youth, and early marriage is more common in some ethnic groups.²²

Overall, females tend to marry older men. One in four currently married women aged 15-24 years is married to a man who is older by five to nine years. The prevalence of a large spousal age difference is more common in urban areas and amongst the wealthiest quintile.²³

1.4 Objectives and process overview

The AYSA was led by the LYU with primarily support from UNFPA. The process was a collaborative one with technical input from BI and other UN agencies. It focused on five key areas of young people’s lives; health, education, work, protection and participation and aimed to:

1. Synthesize available data from existing documents and reports in order to provide an overview of the current situation of young people;
2. Review current policies and legislation and identify the lessons learned from existing programmes directed to young people;
3. Assess the views of young people and the significant adults in their lives (duty bearers);
4. Identify gaps and draw conclusions for interventions that would improve the lives of young people;
5. Carry out the AYSA in ways that ensured ownership and inputs from a range of sectors, and that it contributed to strengthening the capacity of the LYU.

²⁰ National Maternal and Child Health Centre, MoH (2007): *Adolescent Migrants in the Greater Mekong Sub-Region: Are they equipped to protect themselves against sexual and reproductive health risks?*

²¹ MoH and Lao Statistics Bureau (2012): Lao Social Indicator Survey.

²² Ibid.

²³ Ibid.

The data for the AYSA were obtained from a number of different sources:

1. **Legislation and Policy Review:** Existing policies, laws and strategies of importance to young people were identified and reviewed in order to explore coverage, relevance and consistency, to serve as a reference for future research, and to identify gaps that may require further attention and lessons learned.
2. **Programme Review:** Programmes that have been developed for young people, or that include a significant number of young people as beneficiaries, were analysed to obtain an overview of current responses to young people, identify lessons learned from existing programmes and identify gaps.
3. **Secondary Data Analysis:** A review of recent reports, studies and evaluations was carried out in order to synthesize available quantitative and qualitative data that had been collected and analysed in the country since 2005, which describes the current situation of young people.
4. **Primary Data Collection and Analysis:** The primary data were mainly qualitative in nature and obtained from several sources; FGDs were carried out with young people, parents and village authorities and KIIs with selected institutions and individuals were used to obtain more detailed information on selected issues.

In order to ensure that it was technically sound and facilitate opportunities for input and engagement from a range of sectors and partners, the LYU initiated the following structures and processes for the AYSA:

1. **Steering Committee (SC):** This consisted of senior representatives of the LYU and government Ministries with an interest and involvement in health, education, employment and protection of young people, with the aim of providing high-level oversight and guidance for the AYSA.
2. **Technical Working Group (TWG):** This included technical staff from the LYU and government Ministries, Non-Government Organisations (NGOs) and UN organisations, with the aim of ensuring a two-way flow of information about the AYSA and providing the necessary technical guidance based on national experiences.
3. **Network of Young People (NYP):** A group of young people were identified, of whom many were already members of an existing youth network, in order to ensure the existence of a forum for their perspectives to be inputted into the planning and results of the AYSA.
4. **National Technical Organisation (NTO):** BI was selected through open competition to provide technical support for the AYSA, including supporting the capacity development of the LYU in relation to the primary and secondary data collection and analysis.

Throughout the course of the AYSA there were weekly meetings between the key staff members of LYU, UNFPA and BI responsible for the AYSA, in order to strengthen the management and technical quality of the AYSA. There were also regular meetings of the Technical Working Group, in order to facilitate an ongoing flow of information with key Ministries with responsibilities for young people. Six meetings of the Steering Committee were held at strategic points of the AYSA in order to provide overall guidance.

In addition, three national workshops were organized that included members of the TWG plus members of the Young People's Network, UN partners, international and national NGOs and academic institutions. The first of these was held to provide guidance for the overall planning of the AYSA; the second provided a forum to discuss the secondary data analysis and contributed to the planning of the primary data collection; and the third workshop was held to review the findings of the primary data collection, and the policy and programme reviews, draw conclusions and formulate implications for action, which were subsequently reviewed by the Steering Committee.

1.5 Methodology

The AYSA took place during 2013, starting with a national planning workshop that was held in Vientiane, December 2012.

The data for the AYSA were obtained from a number of different sources; **Review of existing legislation, policies and strategies of importance for young people:**

Laws, policies and plans have a major impact on young people's assets and problems, on the opportunities and challenges that they face in life. They provide the overall framework that mandates or facilitates activities that respect, protect and fulfil young people's rights. They also make a statement about what the government thinks, should or should not do to improve young people's health, education, work, protection and participation, and outline priority interventions for achieving this vision.

A review of existing laws, policies and plans that relate to young people in Lao PDR was therefore carried out as a specific component of the AYSA, in order to explore the coverage, relevance and coherence of existing policies and legislation, to serve as a reference for future research, and to identify gaps that may require further attention.

Documents were obtained from the Ministry of Justice (MoJ), who collected the information on laws relating to young people from the National Assembly (NA), and the websites of the Lao government. All the laws identified as being of relevance to young people were analyzed using a standard matrix, and the details are available in *Annex 5*. The summary in *Section II* provides a compilation of the laws pertaining to young people in Lao PDR, including the requirements for safeguarding the interests of young people and punishments for perpetrators of offences against them.

In addition, available documentation on ministerial policies and plans was reviewed in order to identify specific aspects of existing policies and strategies that focused on young people. This review was complemented by information obtained through KIIs with government officials.

Review of programmes that have been developed for young people, or that include a significant number of young people as beneficiaries:

Existing responses to young people's health, education, employment, protection and participation were reviewed to describe existing programmes and identify gaps. The Programme Review took place from June – October 2013.

The aims were to:

1. Identify and map the current availability of services and programmes for young people (health, educational, vocational, livelihood, recreational, protective, voluntary and networks);
2. Identify major gaps and overlaps in service and programme provision;
3. Assess technical and financial inputs; and
4. Assess how services are understood, accessed and perceived by young people.

The AYSA Technical Working Group compiled a list of international non-governmental organisations (iNGOs), UN agencies, mass organisations, local Non-Profit Associations (NPAs), and relevant government departments operating in Lao PDR. This list was based on professional networks, the National Directory of Essential Services for Children and Youth in Lao PDR²⁴, and the Internet Directory of Non-Government Organisations (NGOs) in the Lao PDR.²⁵ Based on this list, organisations, associations and departments

²⁴ Lao Women's Union (2012/13). *National Directory of Essential Services for Children and Youth in Lao PDR*. Vientiane, Lao PDR.

²⁵ Internet Directory of Non-Government Organizations (NGOs) in the Lao PDR (2014), <http://www.directoryofngos.org>.

were contacted by email and phone, introduced to the AYSA and the programme review, and asked to provide information on relevant programmes and services. In addition, the Internet Directory of NGOs in Lao PDR and organisations' websites were searched in order to identify additional programmes.

A number of criteria were applied to assess the eligibility of the programmes identified for inclusion in the programme review:

Age group: The programme should explicitly target young people aged 10-24 years; or, if a programme directed to the general populations it should include some specific elements targeting young people. If a programme targeting a specific risk group, a high proportion of the beneficiaries should be in the 10-24 years old;

Coverage: The programme should be national; or if provincial, should target at least three districts;

Timeframe: The programme should have been running for at least three years, either currently or during the past five years; or if planned, it should have a well-developed project document and budget.

Programmes not meeting one of these criteria, but targeting vulnerable, marginalised or other at risk young people were considered on a case-by-case basis. In addition, a number of programmes that were mentioned during the key informant interviews with selected Government Ministries, UN organisations and NGOs have been included.

In terms of data extraction, for each programme identified, the following information was collected:

- Details of organisations and partners, including contact details
- Programme category
- Target group(s): age, sex, ethnicity, risk group
- Geographic coverage: province and district level
- Timeframe
- Aims and objectives
- Budget
- Funding sources (sustainability)
- Involvement of young people
- Systems for monitoring and evaluation (M&E)
- Any available data and findings from M&E

Programmes were broadly categorized *post hoc* as: health, sexual and reproductive health (SRH)/HIV, education, skills development, employment, protection, disability, participation, and risk reduction. The health category encompasses health education, health services, and nutrition-related health, but excludes services and health education specific to SRH and HIV/AIDS. Risk reduction encompasses road safety, accident prevention and disaster risk reduction.

A descriptive analysis was conducted of the selected programmes that summarise their activities in terms of the five pillars of the AYSA: health, education, employment, protection, and participation. In addition, the interventions were reviewed from the perspective of several programmatic categories, including funding sources, governance, target groups, coverage, capacity development and monitoring and evaluation.

Review of Secondary Data Analysis

Recent reports, studies and evaluations were reviewed in order to synthesize available quantitative and qualitative data that had been collected and analysed in the country since 2005 (see point 7, Annex 3).

The overall objective of this review was to identify appropriate secondary data sources, complete an inventory of these, and extract key information pertaining to young people aged 10-24 years using a

standardized matrix. Significant gaps in the available data and analysis were then to be identified, and the implications for primary data collection outlined, in order to ensure that the primary data that was collected complemented and added to the data that were already available.

The AYSA Technical Working Group, supported by UNFPA and with technical inputs from other UN agencies and INGOs, organized the identification and collection of background documents. Multiple requests for relevant reports and documents were made to government bodies, UN agencies and NGOs. Documents were reviewed against three basic inclusion criteria.²⁶ Of the more than fifty documents collected, thirty-one were found to meet the agreed criteria (see *Annex 6*). For each of these documents a summary matrix was completed. Matrices were completed in the same language as the original document (Lao or English) and then translated as relevant. Regular meetings were held with the LYU and the TWG, to provide opportunities for them to input into the analysis of the secondary data sources.

The secondary data analysis process, which took place during the first quarter of 2013, demonstrated that there *is* existing information relating to the situation of young people in Lao PDR. In particular the Lao Social Indicator Survey (LSIS), produced by MoH and the Lao Statistics Bureau, was found to be both a comprehensive and recent source of data about young people.

Primary Data Collection and Analysis

The collection of primary data for the AYSA was built on and intended to be complementary to the findings from the Review of the Legislation and Policies, the review of programmes, and the Secondary Data Analysis. The primary data were mainly qualitative in nature and obtained from several sources.

Focus group discussions (FGDs)

Young people were invited to FGDs to obtain their thoughts and perspectives on recent changes in young people's lives, aspirations, health, education, work, protection, participation and leisure. An effort was made to ensure that the young people included in the FGDs were representative of some of key variables that had been identified in the Secondary Data Analysis as being important determinants for the outcomes that were of interest, notably age, sex, educational status and geographic domicile (rural, urban and off-road). FGDs were also held with parents and with the village mediation unit including, where possible: village head/deputy head, Lao Front, LYU, Lao Women's Union (LWU), teachers and health care providers from the local health centre in order to obtain information relating to young people from the perspectives of the village authorities.

FGDs of 1-2 hours duration were conducted in each site, led by LYU researchers and supported by BI. They were held separately with young men and women and with different age groups (10-14 years, 15-19 years, and 20-24 years) (see *tables 1, 2 and 3, Annex 7*).

FGD were also held with monks in Luangprabang, and with male and female university students in Vientiane Capital.

Key informant interviews (KIIs)

These interviews were carried out with a small number of additional people, including:

- Representatives from Health, Education, LYU, LWU, Police and Trade Union from one district were selected in each of the provinces: an urban district in Luangprabang, a rural district in Savannakhet, and a rural off-road district in Attapeu;

²⁶ Must be either an assessment, evaluation or research study report; 2. Must be published within the last five years (exception was made in the case of a child labour study and a study measuring HIV prevalence among men who have sex with men (2007), where more recent data were not available); 3. Must contain data related to young people aged 10-24 years.

- Entertainment owners, 3 in depth interviews with entertainment venue owners, one per province, covering urban, rural and off-road settings;
- Organisations with a specific focus on issues of importance to young people, such as NGOs and UN organisations working on migration and disability to obtain more detailed information on selected issues (see table 4, Annex 7);
- Government Ministries that have particular responsibilities for young people's health, education, employment, protection and participation: MPI, MoH, MoES, MoLSW

The results were discussed in the TWG, with members of the AYSA's Young People's Network (YPN) and AYSA's Steering Committee in order to identify conclusions and implications for policies and programmes.

1.5.1 Site Selection

Primary data collection was conducted in one northern, one central and one southern province: Luangprabang, Savannakhet and Attapeu for the following reasons:

- It would be possible to compare urban, rural and off-road settings in one province (Luangprabang).
- It would be possible to compare each type of setting in at least two provinces.
- The towns of Luangprabang and Savannakhet are among the largest urban centers in the country and would provide good examples of urban young people.
- Luangprabang and Savannakhet provinces also have very rural areas for comparison.
- Luangprabang and Savannakhet are also reported to have a high proportion of young people.
- Attapeu was selected as a particularly rural province with ethnic diversity.
- The three provinces selected also embody particular issues that may impact on young people, such as domestic and international migration, sex work, and changing livelihoods.

Vientiane was not included because secondary data is more readily available pertaining to young people in Vientiane.

1.5.2 Data Collection and Analysis

Sets of question guides for the KIIs and the FGDs were developed in consultation with the TWG, UNFPA, the international and national consultants and the key development partners, notably UNICEF, UNESCO and ILO. Participatory tools, for example daily routines and the "ten seeds" technique²⁷ were also prepared to facilitate interactive discussions with young people, particularly the 10-14 year olds. The questions and tools were field tested in Vientiane Province following the focus group training, and then modified as necessary.

Twenty-eight TWG members and volunteers from LYU and Care International were included in the initial training for the data collection. The training was carried out in Thalad, Vientiane Province, and consisted of 5 days of core training on the objectives of the assessment, how to conduct FGDs and KIIs using the prepared question guides/tools, data management and research ethics. Two days of field-testing of the questionnaires and a further two days of data entry were completed immediately after the core training. Following the training, 18 interviewers and one co-ordinator per province were identified from amongst the trainees, and their roles in the data collection teams were defined.

²⁷ Jarakayan, R. (2002): *The Ten Seed Technique*.

Six teams of data collectors were formed. One male and one female data collection team travelled to each site/province, with each team consisting of one moderator and two note takers. BI supervised all data collection.

The methodology for the data collection was approved by the National Ethics Committee and all participants in the FGDs and KIIs were provided with information about the purpose of the AYSA, given assurances about confidentiality and the systems in place to protect their identity, informed of their right to withdraw at any point, and requested to provide verbal consent prior to data collection. For the FGDs involving 10-14 year olds, parental consent was also obtained.

Participants for the FGDs and the KIIs were selected with support from district and village level authorities, based on agreed criteria, including age, sex, ethnic group, in-school and out-of-school young people, married-not married, and members and non-members of LYU. Interviews and discussions were conducted in local languages, using translators where necessary.

All FGDs and group KIIs were either audio taped or the data collectors took detailed notes. The notes were compiled by the teams on a daily basis to ensure that all information was captured while their memories of the discussions were still fresh. The notes were subsequently typed up to facilitate storage and analysis. The data collectors debriefed on a daily basis in order to identify any issues that needed to be resolved or improved, thereby ensuring that they obtained meaningful information from the respondents.

Following the completion of the data collection, the team members were brought together to attend a 2-day data analysis workshop in order to learn how to analyse qualitative data. They subsequently analysed the data over a 10-day period under the supervision of BI staff. The content of the FGDs was analysed through thematic extraction of key points by the AYSA pillars of health, education, employment, protection and participation. Themes and sub-themes were identified in the transcripts of the FGDs by a core group of 6 LYU researchers, who followed them through the different age groups and compared male and female responses. The raw data was extracted in Lao language, and translated verbally into coding that was entered into Excel in English. Once in Excel, commonalities across groups were summarized and an overall situational description was prepared for each of the key subgroups, by province.

1.6 Challenges and limitations of the study

There were a number of challenges and limitation encountered during the AYSA.

Challenges

- To ensure regular inputs by all Ministries with responsibilities for young people because of competing commitments and priorities. It was not always easy to keep to timelines because of the explicit aim of using the AYSA to strengthen the capacity of the LYU, compounded by the fact that there were staff changes in all organisations involved with the AYSA: activities therefore often took longer than anticipated.
- The need for frequent translations between the working languages of the AYSA (Lao and English) and for finding a balance between the ideal and the possible, in terms of the selection of participants for FGDs and KIIs for example, may have introduced some minor biases and inaccuracies. The FGDs were conducted and recorded in Lao language, and the preliminary analyses were done in Lao. Translation followed with further analysis and report writing, which again may have led to some loss of granularity, clarity and possibly accuracy in some of the details of the final report.
- For the secondary data analysis, there were delays in the collection of documents, and even at the process's completion it was difficult to know whether a complete set of relevant documents had

been collected.²⁸ Moreover, some reports received were not included in the analysis matrices because of lack of appropriate age disaggregated data (even where 10-24 year olds may have been a part of the included population).

Limitations

- There were a number of limitations to the primary data collection and analysis, some of which are outlined in Annex 9. Although there were criteria defined for the selection of participants in the FGDs and group KIIs, it is likely that sometime selection was based on people's availability. In addition, the sheer volume of the data collected, necessitated input from many different analysts, which may have resulted in biases in the interpretation of the results.
- Overall, the secondary data analysis process identified a range of available data relating to the situation of young people in Lao PDR. In particular, considerable information was found concerning: sexual and reproductive health; education; employment; and domestic migration. Geographically, however, a large amount of the existing data is focused on the Vientiane Capital. Conversely for the topic such as participation, little data was available, hence the difficulty to enlarge on the analysis for this topic. Issues that appear to be less well covered in existing data include: other health issues that might be of concern to young people, for example accidents, substance use and mental health; protection and vulnerability, such as gender-based violence and child protection; and youth participation. It is also of note that existing data tend to focus on problems that young people face, rather than on the assets that they represent for their families and communities.
- In general existing studies are not standardized in terms of a range of characteristics, including categories of age disaggregation, geographic coverage, year of publication and research methodology. As such, the data included in this secondary analysis are not always easy to compare or summarize. However, as far as it is possible to do so, this section of the ASYA provides an overview and synthesis of existing secondary data pertaining to adolescents and young people in Lao PDR.

²⁸ Since many relevant reports in Lao PDR are unpublished, or are inaccessible through normal channels of review, the Secondary Analysis of Data depended on members of the SC and TWG to identify and share available reports/data.

II Mapping national frameworks in support of Lao young people

2.1 National Legal framework

The NSEDP, 2011-2015, defines measures to meet the MDGs by 2015. Human resource development is one of the major priorities of the this plan.

There is no comprehensive national policy or strategy for young people in Lao PDR, although LYU has been declared as responsible for establishing a policy/strategy on young people. A review of the existing legislation and policies assessed the revised and promulgated laws of Lao PDR in order to determine which portions of specific laws, if any, pertained to the interests of young people aged 10-24 years. There are a number of national plans, policies and strategies which do have some relevance or focus and guide development on young people, even if there is no explicit mention of young people's specific needs and problems, for example the strategic plan for disaster, the national nutrition policy, and the strategy for skills development and employment in Lao PDR.

In order to provide a context for the overarching initiatives of the Lao People's Revolutionary Party and the policies and programmes of different Ministries, it is important to understand two key elements in Lao PDR: the *Four Breakthrough* Resolutions of the 9th Party Congress that guide development in Lao PDR, which in turn are supported by the *Three Builds* (Sam Sang).

To achieve the national targets that it has outlined, the government developed four goals to breakthrough²⁹:

1. Breakthrough in thinking by releasing and resolving the unchanged, conservative mind, recklessness and unfairness;
2. Breakthrough in human resource development especially in development and building capacity of civil servants in various areas according to the real situation;
3. Breakthrough in resolving management systems that holdback commercial production (products made for commercial purpose) and service delivery;
4. Breakthrough in poverty eradication of the people, by seeking the source of funds and special promotion policy, create social economic infrastructure by setting this as a priority in development to be a link to other development areas.

These Four Breakthrough goals have to be integrated with each other. To enhance their achievement the government defined a number of policy guidelines, one of which is the Three Builds:

1. Build the provinces as the strategic unit;
2. Build the districts to be a strong fully capable unit;
3. Build the villages as a development unit.

While none of these specifically mention young people, they clearly have important implications for adolescents and youth. For example, the achievement of poverty eradication will depend heavily on the workforce, the majority of which are young people in Lao PDR.

²⁹ The four goals to breakthrough were originally formulated in Lao language. This unofficial English translation attempts to capture the meaning of the Lao version and is not a direct translation.

In some cases, the laws that were reviewed directly serve the needs of young people, for example the Law on the Protection of Rights of the Child (2007), in which “child” is defined as up to the age of 18 years. Similarly in terms of the Education Law (2007), the majority of the people targeted are young people.

In other laws, for example the Tobacco Law (2009), the main focus is the general population, although there are some specific aspects of the law directed to young people and many of the broader provisions of the law will indirectly affect young people, for example smoke-free spaces.

In most of the 93 laws in Lao PDR, there is no direct language indicating that any specific consideration has been given to the specific needs of young people. In the 17 laws identified that include language relevant to young people so do explicitly mention children and youth (see Table 1), while there is clearly an intent to protect the interests of young people, in reality the laws seem to have limited effect on the daily lives of young people because they lack both enforcement and an awareness by the general population that the laws exist.

Table 1: Laws that include a focus on young people

Civil Procedure Code (Amended)	2012
Criminal Procedure Code (Amended)	2004
Drug Law [Includes Law on Narcotic Drugs]	2007
Education Law	2007
Election of National Assembly	2010
Family Law	2008
Health Care Law	2005
HIV/AIDS Prevention Law	2011
Labour Law (Amended)	2007
Lao People’s Revolutionary Youth Union Law	2009
Law Governing the Development and Protection of Women	2004
Law on Land Traffic	2000
Law on National Defence and Security	1995
Law on the Protection of Rights of the Child	2007
Nationality Law	2004
Penal Code (Amended)	2005
Tobacco Control Law	2009

In terms of policies and plans, again young people are implicitly included in so far as they are part of the overall population, but their unique needs and perspectives are rarely identified as distinct from other age groups. This has many implications in terms of their health, development and protection, and the lack of specific strategies for youth in terms of employment may negatively affect the ability of Lao PDR to be competitive with neighbouring nations.

MoES takes the lead in fulfilling the Government’s commitment by implementing the Education for All National Plan of Action (2003-2015) which seeks to accomplish three major tasks which are equitable access, improved quality and relevance and strengthened education management. In order to fulfill its targets in achieving parity in access to lower secondary education, a focus on increasing the number of girls attending all levels of school will be needed.

In addition, Lao PDR at the international level has ratified and implemented a number of international conventions, conferences, and bilateral treaties and memorandums of agreement that underpin particular issues that affect youth, including the International Conference on Population and Development Programme

of Action Plan (ICPD PoA), the Convention on the Rights of the Child (CRC), the Convention on the Elimination of All Forms of Discrimination against Women, Convention on the Rights of Persons with Disabilities, a number of fundamental ILO conventions, and a Memorandum of Understanding (MoU) related to anti-human trafficking and drug control with the neighbouring countries. These conventions and agreements have been translated into policies including the Reproductive Health Policy (2005), National Policy on Population and Development (2006), the National Strategy on Advancement of Women (2011-2015), the National Policy, Strategy and Action Plan on Inclusive Education (2011-2015), the National Strategy and Action Plan for HIV/AIDS/STI Control and Prevention.

2.2 Donor-supported, governmental and programmes for young people

The national programme mapping on youth promotion and protection activities is of importance to policy planning and intervention.

In this analysis, a total of 48 programmes were identified, of which 33 were deemed eligible and are included in the review. The remaining 15 programmes were submitted by organisations or identified online but were excluded due to: small geographical coverage (n=1), limited number of beneficiaries (n=3), did not adequately focus on young people aged 10-24 years (n=6), inadequate information available (n=3), or not a programme (primary research or policy) (n=2) (*for details see table 1 and 2, Annex 4*).

A total of 31 providers were involved with the eligible programmes that were identified, more than one provider contributing to some programmes (see Table 2). The majority of eligible programmes (88%) were current programmes, while four (13%) were completed in the past five years. No programmes for future implementation were identified.

A total of seven (21%) programmes were described as national. The remaining programmes covered a median of four provinces out of a possible total of 17 provinces. The most frequently covered province was Vientiane Capital; 13 (39%) programmes were in Vientiane Capital, 10 (30%) in Luangprabang, 9 (27%) in Savanakkhet, 8 (24%) in Champasak, and 7 (21%) each in Vientiane Province and Saravane (see *figure 1, Annex 4*). The provinces with the lowest coverage were Phongsaly, Luangnamtha, Xiengkhuang and Sekong. However, some provinces that are commonly considered remote, with high poverty rates, had relatively good representation of youth programmes; for example, Attapeu, Oudomxay and Saravane provinces each had 4 programmes.

Many programmes reviewed were only operating on a small scale, either in terms of geographical coverage or a limited number of beneficiaries. This is not a problem *per se*, but becomes an issue if the programmes are not adequately evaluated. If they have not been shown to be effective it is not possible to know whether these programmes are good examples to scale up and replicate or not.

Table 2: Organisations and government ministries (n=30) providing youth-related programmes in Lao PDR, and categories of programmes offered

	Organisation(s)	Health	SRH/HIV	Education	Skills development	Employment	Drug use	Disability	Participation	Protection	Risk reduction
UN agencies and related bodies	1 UNESCO										
	2 WHO										
	3 UNICEF										
	4 UNFPA										
	5 World Food Program										
	6 World Bank										
iNGOs	7 Plan International										
	8 Save the Children										
	9 CARE International in Lao PDR										
	10 Power International										
	11 Handicap International										
	12 World Education in the Lao PDR										
	13 Christianity Agency of Norway to Lao PDR										
	14 AFESIP										
	15 Community Learning International										
	16 Adventist Development and Relief Agency										
	17 International focal village agency										
	18 Santi Volunteer Association										
	19 Friends International										
	20 Action With Lao Children										
Lao Government	21 Ministry of Health										
	22 Ministry of Education and Sports										
	23 Ministry of Information, Culture and Tourism										
	24 Centre for HIV/AIDS/STIs										
Lao mass organisations and non-profit associations ³⁰	25 Lao Youth Radio										
	26 Lao Youth Union										
	27 Lao Women's Union										
	28 Lao Positive Health Association										
	29 Lao Life Skill Association										
	30 Lao Red Cross Society										
	31 Young Entrepreneurs Association of Lao PDR										

³⁰ LCDC was contacted, but refused to participate in the research.

The most common areas targeted by programmes were education (39%), skills development (36%), protection (27%), SRH/HIV (21%) and health (15%). Other programme categories are depicted in *figure 2, Annex 4*. Each programme could cover more than one category, so the totals add up to more than 33.

Numerous programmes were not specifically targeted at young people, although a high proportion of beneficiaries were young people. While some programmes included at least some focus on young people aged 10-24 years, specific target populations varied. Some programmes had more than one target population. The most commonly targeted groups were secondary school children (30%), young people in general (27%), primary school children (24%), out-of-school young people (18%), and vulnerable or marginalised young people (18%). Other populations targeted by programmes are shown in *figure 1*. Often these programmes do not differentiate between young people by gender and treat young people as recipients, rather than partners in programme decision-making.

Monitoring and evaluation (M&E)

Most of the programmes (97%) included in the review specified that they had systems in place for M&E. Of these, 13 (41%) had completed a mid-term or final evaluation for the current or previous programme phase, 19 (59%) provided monitoring data or evaluation results, and 12 (38%) had future evaluations scheduled.

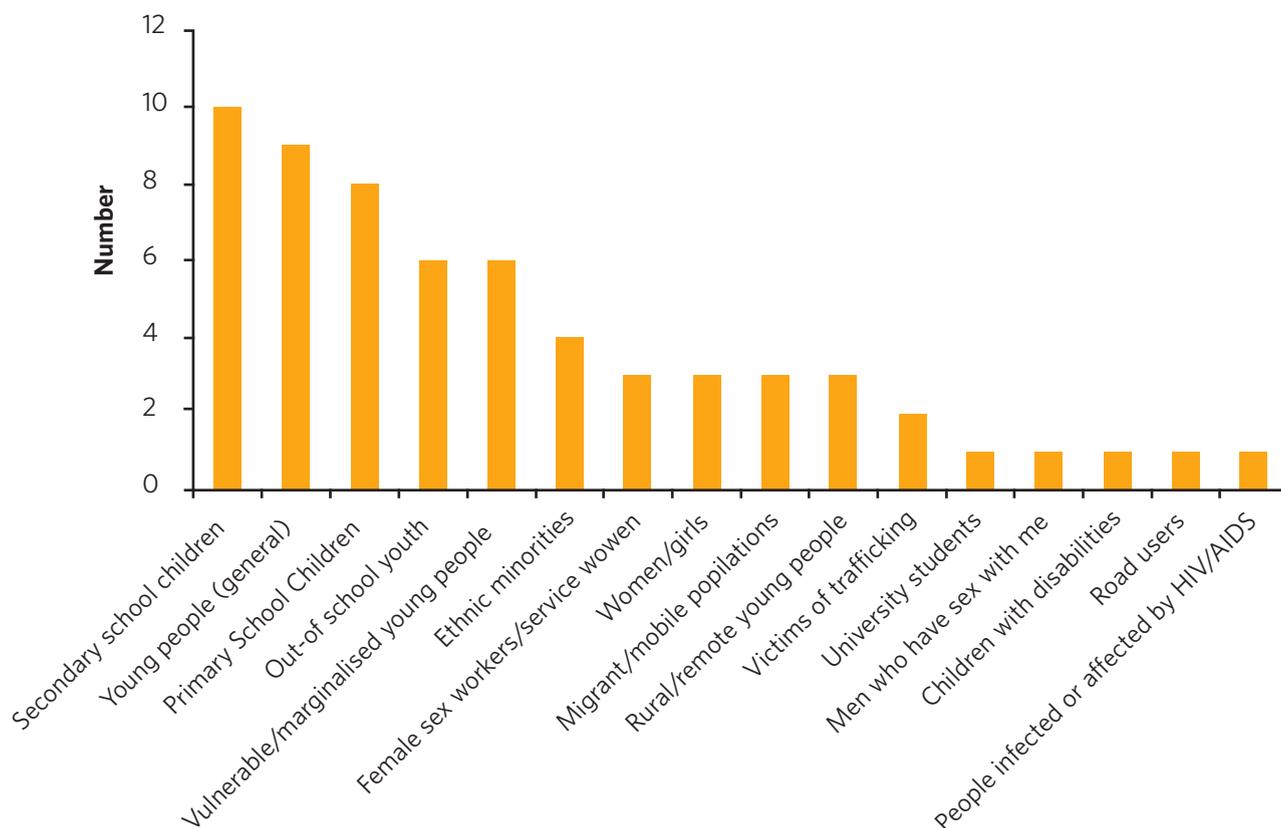
A major limitation of many programmes targeting young people in Lao PDR was a lack of comprehensive M&E. While most programmes stated that they had M&E systems in place, these were frequently limited to assessing inputs, process and outputs, such as the number of peer educators trained, the number of operational centres created, or the number of young people accessing the programme or service. While such data are important, improved outcome and impact assessments are required to assess the effectiveness of programmes, ensure evidence-based practice, and support the appropriate allocation of resources. It is also helpful if programmes can assess coverage and the levels of awareness and support for their interventions within the target population

Only a small number of programmes included outcome and impact indicators, for example: WHO conducted a parasitological survey to assess the impact of deworming; Handicap International have planned baseline and follow-up knowledge, attitudes and practice (KAP) surveys to measure changes in relation to road safety and risk behaviours; and UNICEF and MoES compared knowledge and behaviour between students who attend schools with and without the life-skills education curriculum. Some programmes reported qualitative assessments with programme personnel and/or beneficiaries.

Most programme data and reports were not publically available - despite programmes having undergone mid-term or final evaluations, the results had restricted organisational access and were not shared, or final evaluations were pending at the time of review. It was therefore often difficult to assess the coverage and effectiveness of programmes. No M&E systems collecting age-disaggregated data were identified.

Peer education was a popular strategy in programme implementation, particularly in health-related programmes. However, M&E data for peer education programmes was mostly limited to the number of peer educators trained, and how many people were reached through the networks of peer educators.

Figure 1: Target population(s) of youth and adolescent programmes (n=33)



Twenty-seven (82%) programmes were externally funded through foreign government donors, such as the Australian Government Overseas Aid Program (AUSAID), the United States Agency for International Development (USAID), the government of Luxembourg, the European Union (EU), and UN organisations and NGOs, such as UNFPA, WHO, UNICEF, Population Services International (PSI), and the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM). Only two programmes specified Lao government funding, and four projects did not indicate funding sources. The areas that obtain major interest from donors include education, health and employment.

Two programmes specifically mentioned that they were on hold or would not be continued due to a lack of funding. Other programmes recognised that they were dependent on external funding and would not be able to continue if funding was withdrawn.

Twenty-two programmes (67%) were implemented with or by a Lao government ministry or department at a central, provincial or district level, such as MoES, MoH, MoLSW, Ministry of Information, Culture and Tourism (MoICT), Centre for HIV/AIDS/STIs (CHAS), and Ministries of Public Works and Transport (MPWT). An additional 12 programmes (36%) partnered with or were implemented by local NPAs, mass organisations, or local business associations, such as LYU, Lao Positive Health Association (LaoPHA), LWU, Lao Red Cross Society and the Young Entrepreneurs Association of Laos (YEAL). Overall, 30 programmes (91%) specified that they work through partnerships with government or local organisations.

Government and civil society partnership in programmes is important for sustainability, and should include appropriate capacity building and handover periods. The review identified a high level of partnership with government and local mass organisations and NPAs, as is required by the Vientiane Declaration of 2006.³¹ Only 10 programmes specifically mentioned capacity building with local partners. While this

³¹ Vientiane Declaration on Aid Effectiveness (2006): http://www.undp.org/content/lao_pdr/en/home/library/poverty/Vientiane_Declaration_Aid_Effectiveness/.

does not preclude other programmes having also carried out capacity building, it is unclear in other cases how partnerships operated and whether there was a concerted effort to develop the capacity of the local government and organisations to continue to implement the programmes in the long-term.

2.3 Policy and Programming Implications

- Young people are rarely the specific target of programmes, but are rather treated as part of a larger population expected to benefit from these programmes.
- In many cases, where programmes are targeting young people, they are often treated as homogenous and as recipients.
- The development or review of plans, policies and laws need to be reviewed through a “young people’s lens”.
- Youth-related, gender-responsive policies have not received much attention. Gender equity has been well noted in the education sector. However, it should be examined in all sectors of development.
- The lack of a specific policy on youth and a coordinating government body might explain significant gaps in both policy, programmes, and monitoring.
- If youth are to become an engine of growth for the country, much needs to be done to ensure that their participation in planning at different levels is expanded. There is a need to establish mechanisms/procedures/forums for young people to ensure that their voices are heard and to ensure their increased participation in decisions and development planning at local and national levels, including the development of national plans.



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3.1 Health-related policies and programmes for young people

Several health-related laws protect the rights of young people to access health care, and protect them from potential harm.

The rights of young people to access health is protected by *Article 4* of the Law on Health Care (2005) which states that all people in Lao PDR, including young people, “regardless of [their] gender, age, ethnic origin, race, religion or socio-economic status”, have the right to health care. In terms of overall health sector policies and strategies, MoH guarantees everyone (including *inter alia* young people) access to general health care and care for sexual and reproductive health. These rights are protected both by the Law on Health Care and the National Reproductive Health Policy (2005). Although there is no explicit mention of the provision of condoms, emergency contraception, family planning or maternity services to young people, including unmarried young people, there is also nothing in the current legislation that should be seen as limiting young people’s access to such services and commodities. Abortion, however, is mentioned in both the Penal Code (1990), and in Health Law and can be either lawful or unlawful depending on the location of the services (government hospitals and clinics only), the type of service (vacuum aspiration only, not medication)³² and the marital and financial status of the mother. For young mothers, particularly those who are not married, a legal abortion is unlikely to be approved, thus driving the use of unlawful methods including tablets and surgical abortions performed in unauthorized private clinics, and in neighbouring countries.³³ The penalties for obtaining an abortion, are severe. “Any woman performing an abortion on herself or unlawfully recruiting another person to perform such an operation shall be punished by three months to one year of imprisonment and shall be fined from 100,000 Kip to 500,000 Kip”.³⁴

The law on the Protection of Rights and Interests of Children (2007), defines in *Articles 8* through *10* the responsibilities for the State, society, parents and guardians to “care for and bring up [their] children [...] to protect the children from danger”, and secondly, “to ensure primary health care for [their] children”. In *Article 15*, the law sets out the right of children to receive health information (not restricted by type) and extends to unborn children in ensuring pregnant women have access to pre and post-natal health care, and information on health. Broad statements on access to immunization, health care, sufficient food, and clean water are included.

Article 16 of the law mentioned above on Monitoring and Provision of Health Care for Children states that children from 15 to 18 years of age have the right to decide on method and place of appropriate medical treatment, without parental consent, unless they are under the control of an authority or are mentally disabled. Under the same article there is a requirement to free health care (paid by the State social welfare fund) for disabled, abandoned or poor children. *Article 17* provides for the care of children affected by HIV/AIDS. Under *Article 18* of the HIV Prevention Law (2011) states that if blood from children under 14 years is taken for testing, authorization from parents or guardian is needed.

In the Law on Tobacco (2009), *Article 50*, prohibits persons less than 18 years from smoking, purchasing or selling cigarettes. Several statutes govern the prevention and treatment of other psychoactive substances. *Article 55* of the Law on Narcotic Drugs (2007) (which is part of the Drug Law) assigns the duties and responsibilities of individuals, especially young people to prevent the use of narcotic drugs (i.e. that young people themselves have a responsibility not to use drugs) and to seek treatment if needed.

³² At the time of writing, pilot programmes to evaluate the use of misoprostol in post-abortion-care, and for the induction of supervised abortion in government health settings are underway.

³³ Thailand was mentioned by focus group respondents.

³⁴ Laos Penal Code (1990): Article 92.

Chapter 4, *Article 47*, of the Law on Protection of Rights of the Child (2007) addresses prevention and rehabilitation of drug addiction in young people, and provides conditions and facilities for them in terms of treatment, recovery, rehabilitation and education for addiction, as well as vocational training to encourage increased social involvement. Treatment or rehabilitation at health facilities is considered as a last resort. The admission of young people into rehabilitation centers, if necessary and appropriate, must be implemented in compliance with regulations and approved by the Committee on Protection and Assistance to Children.

The Government is committed to increasing civic awareness of the threats of drug use, including to young people, through education and campaigns. Within the drug treatment sector, both community-based and residential drug treatment programmes are available to young people who can afford them.

Article 13 of the Law on Land Traffic (2000) states that “people on motorcycles shall wear standard helmets”. In *Article 10*, the legal driving age is identified as 15 and above, with those aged 15-18 years limited to motorcycles with engines under 110cc. In the same article, the law limits bicycle use to youth of 12 years and up. The Law is poorly enforced.

A total of 12 programmes worked in the broad area of health, of which the majority worked in sexual and reproductive health and/or HIV, thus aligning to the health needs of young people in Lao PDR that were most frequently described in the secondary data analysis. However, with the exception of the life-skills based curriculum and the Vientiane Youth Centre radio broadcast and hotline, the geographical-coverage of health related programmes was limited. No providers of programmes who responded to requests for information were focusing on mental health issues.

The maternal and child health centres that are included in the national health sector plan specifically focus on the risks of early childbearing and issues relating to early sexual activity to young people; however, there are no programmes designed to specifically target young people or to change attitudes to early marriage and early sexual activity. Within the health sector plan, the only youth-specific project is an HIV/AIDS project that is assigned to LYU to implement. This project includes training and knowledge dissemination, but has no evaluation or monitoring systems in place.

In addition to programmes targeting explicit health issues, there were two programmes based on road safety, and three programmes based on drug-related education, awareness and health promotion.

While *yabaa* (methamphetamine)-use is widespread among young people in Lao PDR, current programmes in general do not have a youth focus, although the government ran an awareness campaign in 2010-2012 in Vientiane Capital with funding from *Bia Lao*, *PhuBia Mines* and other businesses, and supported by Lao celebrities. Drug programmes primarily target rural development among former opium farmers. The United Nations Office on Drugs and Crime (UNODC) has a growing concern that due to migration patterns, injecting drug use, which is more common in neighbouring countries, will increase in Lao PDR, and the average age of people who inject drugs will decrease. UNODC works in partnership with agencies such as the Lao National Commission for Drugs Control and Supervision (LCDC) to implement drug-related programmes, and in general, focuses on improving the capacity of administrative services that would benefit young people, rather than dealing with or targeting young people directly. To date, this work has not been aligned with the LYU.

No programmes targeting young people to provide harm reduction, drug or alcohol support services were identified. However, a number of drug treatment and rehabilitation centres operate in Lao PDR, that are used by young people, including the Somsanga Drug Treatment and Rehabilitation Centre in Vientiane Capital, and centres in Bokeo, Champasack, Luangprabang, Oudomxay and Savannakhet Provinces.³⁵ The centres operate detoxification programmes, rehabilitation, and vocational training services.

³⁵ Lao Women's Union (2012/13). *National Directory of Essential Services for Children and Youth in Lao PDR*. Vientiane, Lao PDR.

3.2 Health Situation

A variety of health issues were highlighted by all of the age groups who were included in the FGDs (10-24 years). The top three health concerns, namely drug and alcohol abuse, unwanted pregnancies and road traffic accidents are all preventable, as are malaria and dengue, and the food and water-borne illnesses that young people also identified.

3.2.1 Alcohol, Tobacco and Illicit Drug use

Unlike neighbouring nations, Lao PDR is recognized to have relatively high levels of alcohol consumption by both males and females. Although drinking behaviour is noted as an issue for males, particularly during festivals, females also consume alcohol.³⁶ For example social occasions, and tradition compels young girls to drink with guests.

The Assessment of Life Skills Curriculum found that 90% of students from Grade 11 reported having consumed **alcohol** at some point, with 53% of males and 16% of females reporting having been drunk at least once in the past six months.³⁷ The average age at which young people started drinking was a little over 13 years, with no significant difference between girls and boys. In Luang Namtha, 50% of 16-19 year olds and 28% of 14-15 year olds reported alcohol consumption in the past month.³⁸ The reporting of multiple risk behaviours (e.g. alcohol use, smoking, and unsafe sex) appeared to be more common in boys than girls interviewed.³⁹ The majority of sex workers interviewed as part of the Integrated Behavioural and Biological Surveillance (IBBS) also reported drinking alcohol every day.⁴⁰

Alcohol abuse was the most commonly mentioned problem in the FGDs: it appears to be widely consumed, and is likely to be an underlying determinant for a number of other health concerns that were mentioned, for example road traffic accidents, fighting amongst young people, and unprotected sex leading to pregnancy.

There are geographical differences within Lao PDR in attitudes towards alcohol consumption and the perception of it as a problem: urban groups, for example, were less vocal about alcohol as a problem, although this may partly be due to their relatively larger concern about drug use. There were also differences expressed in terms of young people drinking all the time, as opposed to young people only drinking during festivals or death “celebrations”.

Youth in our village only drink sometimes in the festival.
Male (15-19 years), rural

Drink to make themselves happy.
Female (15-19 years), rural

There is no legal drinking age in Lao PDR so all groups can and do drink. The perception of alcohol as a problem is particularly associated with violence in families, where the husband may drink and fight with his wife, or children, and with risk-behaviours in older teens, for example drunk driving and sexual activity.

The importance of peer pressure was frequently mentioned, and there is a clear link in respondents' minds between overconsumption of alcohol and traffic accidents. In rural and rural off road areas, drunkenness may also lead to sleeping without a bed-net, and may thus also be a contributing factor to malaria.

After they are drunk they beat each other.
Male (15-19 years), urban

³⁶ WHO (2012). *Baseline Survey of Alcohol Consumption: Availability and Effects on Individual Consumption*, (report presented October 2013, Vientiane).

³⁷ UNICEF and MoE (2009). *Assessment Life-Skills Based Curriculum Project in Lao PDR. Scaling up the response for Children?*

³⁸ Sychareun V, Thomsen S, Faxelid E. (2011). *Concurrent multiple health risk behaviors among adolescents in Luangnamtha province. Lao PDR: BMC Public Health*, 11(1): p.36.

³⁹ Ibid.

⁴⁰ CHAS/MoH, USAID, FHI, Global Fund, ADB and UNAIDS (2008). *Integrated Behavioral Biological Surveillance (IBBS)*.

Road accident after they are drunk, broken hand and leg.
Male (15-19 years), urban

Entertainment venue owners identify drugs and alcohol as problematic, and have to resort to calling in the authorities to arrest young people for violence in their establishments. The lack of control over drinking establishments (soon to be remedied by the proposed Law on Alcohol) creates a negative environment for young people exposure to alcohol and drugs. Although entertainment venue owners note that young people under 14 years of age are not routinely permitted in such establishments, there is currently no legal framework to exclude them based on age.⁴¹ Entertainment venues offer employment opportunities and services, including prostitution, creating the risk that young people will become involved.

Smoking **tobacco**, particularly among young rural males, is common and was much discussed in the FGDs. Tobacco is recognized as being both addictive, and also detrimental to health. Peer pressure to smoke, coupled with the desire to use cigarette smoke as a deterrent to mosquitos among young people farming buffalos, supports the continued use of tobacco in rural settings. Tobacco use was also mentioned in urban settings, but the risks associated with its use are downplayed relative to other health issues of concern to young people.

Smoke to chase mosquitos.
Female (15-19 years), rural

The Assessment of Life Skills Based Curriculum states that nearly all of the Grade 11 students knew the names of common drugs, and just under half of the students said they know at least one person who uses drugs in their community.⁴² While some boys (4% of those in schools offering the 'life based curriculum' and 7% of those in schools without this curriculum) admitted to having taken drugs, no girls did in either type of school.⁴³

Respondents in all geographical regions, and all age groups identified **methamphetamine (yabaa)** use as a problem. While the prevalence of *yabaa* use in Lao PDR is not known, it is of increasing concern to government ministries, and development partners.

Yabaa was the most commonly mentioned drug after alcohol and tobacco. Other drugs, mentioned by respondents were solvents (glue sniffing) and eating or smoking opium, although these were much less frequently mentioned than *yabaa*. A study of young amphetamine users in Vientiane Capital and Vientiane Province found that the majority of participants started using drugs between the ages of 15-19 years.⁴⁴

They take, and sell at the same time.
Male (20-24 years), urban

Predominantly this type of methamphetamine is used by males, although in some cases, parents and village leaders mentioned that young women may resort to sex work as a means of supporting their *yabaa* addiction, implying there is some, albeit limited use among young women. The use of *yabaa* was most evident as a problem in urban and rural settings, rather than off-road rural areas.

All provinces mention *yabaa*, and its association with crime and violence. The violence associated with *yabaa* use, whether directly from users experiencing a drug rage, or the actual or threatened violence of gangsters, dealers and others involved in the trade, was evident in all provinces, and mentioned not only by young people but also by parents and village leaders. Fear of violent retaliation from those involved in the drug trade keeps villagers from reporting dealers, who entice young people (even within the youngest age groups) to use and sell *yabaa*. Once addicted, the need to support their drug habit may lead young people to steal from their family, other villagers and friends.

Nobody dared to report to the authorities because they are afraid these addicts will create problems for them.
District Authorities, rural

⁴¹ Focus group discussions.

⁴² UNICEF and MoE (2009). *Assessment Life-Skills Based Curriculum Project in Lao PDR. Scaling up the response for Children?*

⁴³ Ibid.

⁴⁴ Burnet Institute, CHAS and UHS (2009). *Amphetamine Type Stimulant Use and Sexually Transmitted Infection Risk among Young People in Vientiane Capital and Vientiane Province. Lao PDR.*

There are a number of different reasons given for using yabaa. A study of young amphetamine users in Vientiane Capital and Vientiane Province found peer influence to be a contributing factor in amphetamine use initiation, with 92.5% of participants reporting having used drugs for the first time with a group of friends. Amongst other things, this study recommended the development of a 'peer education' programme to educate young people about the harms related to drug use, and a multi-sectoral approach that tackles supply reduction, demand reduction and harm reduction in a coherent manner.⁴⁵

*Men work hard, they are tired
and then they take amphetamines.
Female, (15-19 years), rural*

The use of yabaa may be initiated by young people as a stimulant to prevent fatigue, and is therefore applied by drivers, security guards and rural people working in the fields and forests to help them stay awake, and contribute to their energy level. For other mostly urban young people, its employ is more motivated by the desire to try something new, and to follow their peers, which may then lead them to selling it to others to support their addiction. The converse may also occur, with young people selling yabaa as a means of income generation subsequently becoming users.

3.2.2 Sexuality and Reproductive Health

Young people in Lao PDR, unmarried as well as married, are having sex. The *LSIS* reports that 26.8% of all females and 20.8% of all males aged 15-19 years had sexual intercourse in the 12 months prior to the study. These figures increased to 70% for both males and females in the age group 20-24 olds. A study of male high school students found that 31% of males aged 16-19 years had ever had sex, with mean age (\pm SD) of first sex being 16.8 (\pm 1.1) years.⁴⁶ A qualitative study of young women's sexual behaviour found that a significant proportion of young women in Vientiane Capital are engaging in pre-marital sex. In the Young Women's Sexual Behaviour Study, a quantitative survey of 832 young women in the general population aged 15-24 years who were students (from school, college and university) beer shop customers, garment factory workers, women recruited from public places (shopping centre and an outdoor recreation area), and hotel/entertainment venue staff, 19.1% of unmarried young women reported having had sex.⁴⁷

The focus groups research of this study also confirms that young people in Lao PDR are sexually active in both urban and rural settings. In urban settings this reflects changing moral attitudes about sex in 15-19 year olds. In rural and rural-off-road settings, sex may in fact be occurring at earlier ages, but is more likely to result in dropping out of school and early marriage. Young males and females in all age groups talked about "playing" in relation to sex, and mentioned the resulting unwanted pregnancies and STIs.

Risk-taking sexual behaviours, including low condom use and multiple sexual partners, are also prevalent amongst young people, particularly amongst adolescents from certain minority ethnic groups of Lao PDR, like for example, among Akha adolescents. In a study of 14-19 year olds from Luang Namtha, risk behaviours related to sex, alcohol and drug use were highest among Akha adolescents, and lowest among Hmong and Yao adolescents.⁴⁸ These differences are likely to be associated with cultural beliefs (see side bar on Akha of Northern Lao PDR).

As already mentioned, alcohol consumption is often a precipitating factor to sexual risk-taking behaviour for girls as well as boys.⁴⁹ In a study of male high school students, only 43% reported using condoms regularly

⁴⁵ Ibid.

⁴⁶ Thanavanh B, Harun-Or-Rashid M, Kasuya H, Sakamoto J. (2013). *Knowledge, attitudes and practices regarding HIV/AIDS among male high school students in Lao People's Democratic Republic*: J Int AIDS Soc., 16: p.17387.

⁴⁷ Department of Health of Vientiane Capital, Burnet Institute and United Nations Population Fund (2008). *Young Women's Sexual Behavior Study, Vientiane Capital, the Lao People's Democratic Republic*.

⁴⁸ Sychareun V, Thomsen S, Faxelid E. (2011). *Concurrent multiple health risk behaviors among adolescents in Luangnamtha province*. Lao PDR: BMC Public Health, 11(1): p.36.

⁴⁹ The content of all upcoming text boxes are either translations of Lao language quotes or represent paraphrases extracted from the conducted interviews.

The Akha of Northern Lao PDR

This ethnic group believes that pre-pubescent initiation customs bring on social and physical maturation. Among girls, this involves 'break through vagina' (a thonh thong), whereby an older, sexually experienced man has intercourse with young Akha girls between the ages of 11 and 15 years, prior to the onset of her menses. Following this, girls have intercourse with various partners until they become pregnant with their first child.

Among boys, in the practice of 'open foreskin' (yaha heu), Akha boys between the ages of 12 and 15 years must seek out an older, sexually experienced woman for their first sexual encounter.

Another customary practice is 'welcome guest' (a thor ta yang), whereby after girls have been initiated, they are expected to entertain visitors to their village, including through sexual relations.

These practices, including concurrent sexual partners, may increase the transmission of STIs and HIV. Akha adolescents and representative groups need to be included in public health planning to develop risk reduction and disease prevention that are respectful of Akha society and acceptable within their cultural framework.

Reference: Sychareun V, Faxelid E, Thomsen S, Somphet V, Popenoe R. Customary adolescent sexual practices among the Akha of northern Lao PDR: considerations for public health. *Cult Health Sex.* 2011 Dec;13 Suppl 2:S249-62.

with casual partners, and approximately half reported using a condom at last sex.⁵⁰ In a cross-sectional study of 913 randomly sampled 16-19 year old adolescents in Luang Namtha province, 55.7% had sex during the last six months, 44.1% had multiple sex partners during the last six months, and 51.7 % did not use a condom during the last sexual intercourse.⁵¹

In a 2010 study of male-to-female (MtF) transgender people⁵² in Vientiane Capital and Savannakhet Province (84% aged 15-24 years), 47% reported more than one sex partner in the past 12 months, and consistent condom use (CCU) during anal sex was 55% with regular partners, 75% with casual partners, and 87% with transactional sex partners.⁵³ In another 2010 study of behaviourally bisexual men and their sexual partners based in Vientiane (median age 22 years), bisexual men reported a median of eight sex partners in the past year, and 14% reported CCU with all partners.⁵⁴ The Tracking Results Continuously (TRaC report) recommends improved promotion of HIV and STI testing and improved behavioural change communication messages related to condom and lubricant use.⁵⁵

A 2008 assessment of **condom programming** found that young people reported receiving information about condoms from schools, television, posters and billboards, while in a study of male high school students, 62% said that their most common source of information was the television, followed by the radio.⁵⁶ An assessment of the 'life skills' curriculum implemented in some schools in Lao PDR found that students with this curriculum had fewer misconceptions about HIV and better

⁵⁰ Thanavanh B, Harun-Or-Rashid M, Kasuya H, Sakamoto J. (2013). *Knowledge, attitudes and practices regarding HIV/AIDS among male high school students in Lao People's Democratic Republic: J Int AIDS Soc.*, 16: p.17387.

⁵¹ Sychareun V, Thomsen S, Faxelid E. (2011). *Concurrent multiple health risk behaviors among adolescents in Luangnamtha province. Lao PDR: BMC Public Health*, 11(1): p.36.

⁵² Transgender youth were not included in any of the focus groups and as such are not identified specifically in future gender-based analysis

⁵³ Phimpachan C, Phanalasy S, Phommanivong V, Scott A, Gray R, Mundy G. (2010). *First Round HIV/STI Prevalence and Behavioral Tracking Survey among Male-to-Female Transgenders in Vientiane Capital and Savannakhet, Lao PDR. Vientiane. Lao PDR: Population Services International.*

⁵⁴ Van Gemert C, Vongsaiya K, Hughes C, Jenkinson R, Bowring AL, Sihavong A, et al. (2013). *Characteristics of a Sexual Network of Behaviorally Bisexual Men in Vientiane, Lao PDR, 2010: AIDS Educ Prev.*, 25: p.232-43.

⁵⁵ PSI and CHAS (2010).

⁵⁶ Thanavanh B, Harun-Or-Rashid M, Kasuya H, Sakamoto J. (2013). *Knowledge, attitudes and practices regarding HIV/AIDS among male high school students in Lao People's Democratic Republic: J Int AIDS Soc.*, 16: p.17387.

knowledge about condoms. The assessment recommended that life-skills education should be incorporated into national core curricula, ensuring that teachers and schools are empowered to deliver measurable results, with improved monitoring at all levels.⁵⁷ Focus group discussions also confirm that workers come to villages to discuss condom use.

There is a health education on radio and TV, but the youth are not interested.
Village Authorities, urban

In this same 2008 assessment, some young people reported wanting to use condoms but not being able to afford them; this was also a problem highlighted by most-at-risk young people (young key populations).⁵⁸

Go with a girl, but forgot condom.
Male (15-19 years), urban

Amongst young women there was also a common perception that carrying or buying condoms is considered to be immoral.⁵⁹ Based on this assessment, it was recommended to develop further supportive programmes to promote quality condom procurement and distribution, as well as the improvement of the condom logistics system.⁶⁰ Other barriers to condom use may be pleasure/discomfort, financial incentives not to use condoms, and intimacy.⁶¹ Social marketing should incorporate strategies for normalizing condom use and associating condoms with love and intimacy.⁶²

In relation to sexual health generally, the Young Women's Sexual Behaviour Study emphasized the need for youth-friendly sexual and reproductive health services, as well as counselling on sexuality, pregnancy, abortion and family planning, to be made available to young people. It also recommended that programmes engage with parents in order to enable them to overcome inhibitions in communicating with and counselling their adolescent children.⁶³

Sexual coercion is another important issue raised by the data from this study, with 22.4% of sexually active young women in Vientiane Capital reporting having been coerced into sex by a partner. This is particularly true of those who initiate sex at a younger age: 52% of those who had first sex at age 16 years or younger report being coerced compared to 18.5% of those who first had sex above the age of 16.⁶⁴ In addition, a 2008 IBBS study of sex workers in four provinces found that 22% reported being forced to sell sex.⁶⁵ The report 'Sewing the Line' recommends the development of a public awareness campaign aimed at changing gendered narratives around rape and coerced sexual encounters.⁶⁶

While **HIV prevalence** in the general population in Lao PDR is low, with rates estimated at 0.2%,⁶⁷ high-risk behaviours for HIV are common, and rapid economic growth, social change and geographical location may precipitate increases in HIV. CHAS collects national age-disaggregated data on case reports of HIV. For the years 2010, 2011 and 2012, the number of new cases of HIV among 15 to 24 year olds was 98, 126 and 102, respectively, accounting for 16.7%, 18.8% and 15.9% of all new cases in each respective year. The number of new cases in 10-14 year olds was small, ranging from one to two each year.⁶⁸ HIV disproportionately affects

⁵⁷ Unicef and MoE (2009). *Assessment Life-Skills Based Curriculum Project in Lao PDR. Scaling up the response for Children.*

⁵⁸ UNICEF Lao PDR and the Ministry of Health (2011). *Rapid Assessment: Most-At-Risk Adolescents and Young People to HIV in Lao PDR.* Bangkok.

⁵⁹ MoH and UNFPA (2008). *Assessment of Condom Programming in Lao PDR.*

⁶⁰ Unicef and MoE (2009). *Assessment Life-Skills Based Curriculum Project in Lao PDR. Scaling up the response for Children.*

⁶¹ UNICEF Lao PDR and the Ministry of Health (2011). *Rapid Assessment: Most-At-Risk Adolescents and Young People to HIV in Lao PDR.* Bangkok.

⁶² Ibid.

⁶³ Department of Health of Vientiane Capital, Burnet Institute and United Nations Population Fund (2008). *Young Women's Sexual Behavior Study, Vientiane Capital, the Lao People's Democratic Republic.*

⁶⁴ Ibid.

⁶⁵ CHAS/MoH, USAID, FHI, Global Fund, ADB and UNAIDS (2008). *Integrated Behavioural Biological Surveillance (IBBS).*

⁶⁶ Care, AusAid and the Lao Women's Union (2012). *Sewing the Line; A qualitative baseline analysis of the risks and opportunities posed for young women by migration from rural Laos to Vientiane for the purpose of employment in the garment industry.*

⁶⁷ Centre for HIV/AIDS/STI (CHAS) (2012). *Global AIDS Response Progress (GARP)- Country Report, Lao PDR.*

⁶⁸ Centre for HIV/AIDS/STI, Lao PDR - *HIV/AIDS Case Report 2012.*

certain populations. While 48% of the adults living with HIV are women⁶⁹, young people at increased risk of HIV are predominantly young men who have sex with men (MSM) and young transgender people, young female sex workers and young injecting drug users.⁷⁰

Male-to-male sex is relatively commonly reported among young Lao men. In a study of male high school students, 15% reported ever having had anal or oral sex with men⁷¹, while in an older study (2004) of 18-30 year old males, 18.5% reported anal or oral sex with men, of which 55% reported anal sex⁷². MSM and MtF transgender people are disproportionately affected by HIV. While age-disaggregated data are not available, in a 2007 Vientiane-based study of MSM, the median age of participants was 21 years, and HIV prevalence was 5.6%; no more recent estimates are available.⁷³ In a study of young MtF transgenders in 2010, 4.2% tested positive for HIV, 12% for gonorrhoea, 32% for Chlamydia, and 6.5% were co-infected with multiple STIs.⁷⁴ No focus group discussions mentioned male to male, or female to female sexual activity in any context.

In 2010, UNICEF led a rapid assessment involving interviews and focus groups with 72 young people at risk of HIV, including young people who were drug users, sex workers, LGBT. In terms of health service provision, young key populations expressed a preference for targeted stand-alone clinics, integrated programmes in mainstream hospitals and clinics, and multi-purpose youth centres. Important characteristics of services noted were: confidentiality, non-judgmental health care staff, clinical expertise, and a friendly environment. Self-censorship, costs, confidentiality, location, service hours, and fear of invasive procedures were cited as barriers to accessing services⁷⁵, similar to those reported by female sex workers.⁷⁶ Focus group discussions also supported that the lack of confidentiality was a barrier to accessing health facilities. In response, recommendations for consideration included: mobile clinics or after hours clinics; programmes to reduce discrimination and increase sensitivity to the needs of most-at-risk young people; access to government hospitals and clinics, including establishing relationships between civil society organisation and government services; and the recruitment and training of most-at-risk young people (young key populations) as volunteers or staff to serve during intake and assessment in government and private services.⁷⁷

HIV was rarely mentioned in the FGDs, and does not appear to be a significant concern in the local setting, although it was mentioned in association with sex work in other countries. Despite its rare occurrence in Lao PDR, most young people (80% of those aged 15-19 years), report having heard about HIV/AIDS, although levels of comprehensive knowledge are low, with two studies demonstrating that less than one quarter of young people aged 15-19 years had a comprehensive knowledge about HIV/AIDS.^{78,79}

Epecially for the person who has a mistress (Mia Noi). Female (20-24 years), urban

⁶⁹ UNAIDS (2012): *Report on the Global Aids Epidemic*.

⁷⁰ UNICEF Lao PDR and the Ministry of Health (2011). *Rapid Assessment: Most-At-Risk Adolescents and Young People to HIV in Lao PDR*. Bangkok.

⁷¹ Thanavanh B, Harun-Or-Rashid M, Kasuya H, Sakamoto J. (2013). *Knowledge, attitudes and practices regarding HIV/AIDS among male high school students in Lao People's Democratic Republic*: J Int AIDS Soc., 16: p.17387.

⁷² Toole M, Coghlan B, Xeuatvongsa A, Holmes W, Pheualavong S, Chanlivong N. (2006). *Understanding male sexual behavior in planning HIV prevention programmes: lessons from Laos, a low prevalence country*. *Sex Transm Infect.*, 82: p.135-8.

⁷³ Sheridan S, Phimphachanh C, Chanlivong N, Manivong S, Khamsyvolsvong S, Lattanavong P, et al. (2009). *HIV prevalence and risk behaviour among men who have sex with men in Vientiane Capital, Lao People's Democratic Republic, 2007*: AIDS, 23: p.409-14.

⁷⁴ Phimphachanh C, Phanalasy S, Phommanivong V, Scott A, Gray R, Mundy G. (2010). *First Round HIV/STI Prevalence and Behavioral Tracking Survey among Male-to-Female Transgenders in Vientiane Capital and Savannakhet, Lao PDR*. Vientiane, Lao PDR: Population Services International.

⁷⁵ UNICEF Lao PDR and the Ministry of Health (2011). *Rapid Assessment: Most-At-Risk Adolescents and Young People to HIV in Lao PDR*. Bangkok.

⁷⁶ Phrasisombath K, Thomsen S, Sychareun V, Faxelid E. (2012). *Care seeking behaviour and barriers to accessing services for sexually transmitted infections among female sex workers in Laos: a cross-sectional study*: BMC Health Serv Res., 12(1): p.37.

⁷⁷ UNICEF Lao PDR and the Ministry of Health (2011). *Rapid Assessment: Most-At-Risk Adolescents and Young People to HIV in Lao PDR*. Bangkok.

⁷⁸ Unicef and MoE (2009). *Assessment Life-Skills Based Curriculum Project in Lao PDR. Scaling up the response for Children*.

⁷⁹ Thanavanh B, Harun-Or-Rashid M, Kasuya H, Sakamoto J. (2013). *Knowledge, attitudes and practices regarding HIV/AIDS among male high school students in Lao People's Democratic Republic*: J Int AIDS Soc., 16: p.17387.

In the Young Women's Sexual Behaviour Study of young females aged 15-24 years, 25.6% were recently sexually active and 18% of those reported having had **transactional sex**.⁸⁰ Transactional sex was also mentioned in some FGDs, particularly in urban settings and amongst university students, with the payment being clothing or new technologies such as mobile phones. Although reported rates of HIV are low among Lao service women (<1%), the prevalence of STIs is high, including 18% for chlamydia and 7% for gonorrhoea.⁸¹ In a study of 407 female sex workers (49% of whom were aged 19 years or younger), 86% self-reported symptoms of reproductive tract infection or STIs in the past three months.⁸² As well as the direct morbidity associated with these infections, STIs may increase the transmission and susceptibility to HIV infection.

In Lao PDR, the term 'service women' is used to describe female sex workers, who commonly work outside of bars and other entertainment venues. It is understood that a large proportion of service women are young people: among service women participating in the IBBS (2008) survey, 84% of those interviewed were aged 15-24 years,⁸³ 17% reported multiple casual partners in the past three months, 17% reported a regular partner in the past three months, and the median number of clients in the past week was two.⁸⁴

*Age 15-19, they play and then they have sex without protection.
Male (20-24 years), urban*

Concerns about STIs were raised in both male and female FGDs, in rural and urban settings. In urban settings there is greater access to information about STIs, but for a variety of reasons young people do not adopt safe sex practices. In rural settings, and particularly in rural-off road settings, the lack of sexual and reproductive health knowledge and poor access to condoms and other forms of contraception contributed strongly to both unplanned pregnancy, and to STIs. Stigma surrounding sex outside of marriage creates "shyness" or embarrassment to approach health providers, who are not trusted to treat young people confidentially.

Early sexual encounters outside of marriage are becoming more common for both young men and young women. This, coupled with the lack of sufficient sexual and reproductive health education, raises concerns for the spread of STIs including HIV, and also the occurrence of unwanted pregnancies and unsafe/illegal abortions, carried out in Lao PDR and in neighbouring countries, with all the negative implications that these have for young women's future sexual and reproductive health.

Particularly in urban areas, early sexual activity is a concern because it contributes to early marriage, unwanted pregnancies and illegal and/or unsafe abortion practices. By contrast, rural parents are sometimes highly supportive of early marriage, since it is their custom.

*Boys from 15-19 just want to try (sex) and they have unprotected sex and get [STIs].
Male (20-24 years), urban*

Parents and other authority figures, including monks, assign blame for young people's problems to the influence of other cultures, the internet, and peer pressure, and their lack of knowledge about sexual and reproductive health. Although there is health education on radio and TV, young people are not interested. In some areas, ethnicity additionally limits access to information because of language barriers.

Stakeholders identify a lack of health services targeting young people. While there are facilities providing services, they have not demonstrated good management of confidential information, and freedom from discrimination or stigmatization.

⁸⁰ Department of Health of Vientiane Capital, Burnet Institute and United Nations Population Fund (2008). *Young Women's Sexual Behavior Study, Vientiane Capital, the Lao People's Democratic Republic*.

⁸¹ Ibid.

⁸² Phrasisombath K, Thomsen S, Sychareun V, Faxelid E. (2012). *Care seeking behaviour and barriers to accessing services for sexually transmitted infections among female sex workers in Laos: a cross-sectional study*: BMC Health Serv Res., 12(1): p.37.

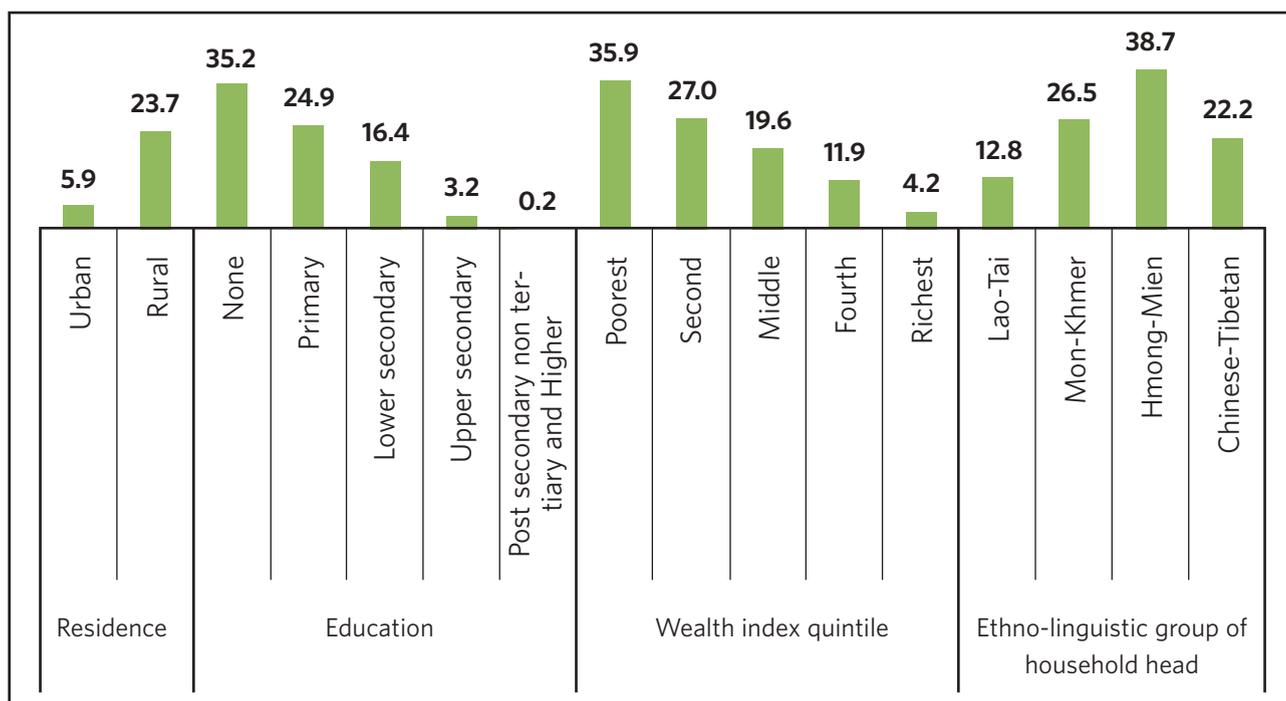
⁸³ CHAS/MoH, USAID, FHI, Global Fund, ADB and UNAIDS (2008). *Integrated Behavioural Biological Surveillance (IBBS)*.

⁸⁴ CHAS/MoH, USAID, FHI, Global Fund, ADB and UNAIDS (2008). *Integrated Behavioural Biological Surveillance (IBBS)*.

3.2.3 Early Child Bearing

Child bearing begins early in Lao PDR, with 17.8 % of females aged 15-19 already having had a child, and 18.2% of females aged 20-24 years reporting a live birth before age 18.⁸⁵ This early start to child rearing is particularly evident in rural areas where the adolescent fertility rate is estimated as 114/1000 girls aged 15-19 (LSIS). Earlier childbearing and higher fertility rates are correlated with rural domicile (23.7% of rural women aged 20-24 years reported early childbearing, compared to 5.9% of their urban counterparts). Early childbearing and higher fertility rates are also correlated with lower education levels, lower wealth quintiles and ethno-linguistic group (see figure 2). Early childbearing was highest among Hmong-Mien women (38.7%).⁸⁶

Figure 2: Early childbearing (proportion of women aged 20-24 years who had at least one live birth before age 18) by area of residence, education level, wealth index quintile and ethno-linguistic group (LSIS 2011-2012).



Apart from condoms, which are rarely used, there is limited or no access to birth control for unmarried people in Lao PDR. As a result, unwanted pregnancy is a frequent consequence of unprotected sexual activity, and abortion is common.

*Take drugs to do abortion because they don't want the baby.
Male (10-14 years), rural*

*Some youth will do illegal abortion, some will buy tablets to provoke abortion; Some will go [abroad] to do abortion; If the girl knows she is two months pregnant, she will take a drug to provoke abortions; There are tablets that can provoke abortion so some women take that drug.
Village Leaders, urban; District Authorities, rural*

In Vientiane Capital, for example, over 20% of sexually active young women reported having had an abortion,⁸⁷ and the IBBS survey found that 71% of sex workers had had an abortion.⁸⁸ Some groups, particularly the rural and urban female 15-19 year olds, mentioned travelling out of the country to obtain abortions in neighbouring countries.

⁸⁵ UNICEF (2012). *Multiple Indicator Cluster Surveys indicator for early childbearing / MICS4 Indicators: Numerators and Denominators, version 3*, http://www.childinfo.org/mics4_questionnaire.html.

⁸⁶ Ibid.

⁸⁷ Care, AusAid and the Lao Women's Union (2012). *Sewing the Line; A qualitative baseline analysis of the risks and opportunities posed for young women by migration from rural Laos to Vientiane for the purpose of employment in the garment industry*.

⁸⁸ CHAS/MoH, USAID, FHI, Global Fund, ADB and UNAIDS (2008). *Integrated Behavioural Biological Surveillance (IBBS)*.

This is not likely to be financially feasible for most young people, who would then need to resort to other local means. Since sex outside of marriage is generally not accepted, it is difficult for young people to obtain health care for STIs, and pregnancies without facing stigma. Village leaders also confirmed that abortions are frequent, and that medications are commonly used to accomplish them.

3.2.4 Vector-borne diseases

Vector-borne diseases play a large role in the health profile of young people. Malaria and dengue both contribute to significant loss of life in Lao PDR, and are therefore serious health concerns (during the field work for the AYSA primary data collection, there were outbreaks of both malaria and dengue). The relative risk is strongly linked to geographic region: the southern rural settings experiencing outbreaks of malaria, and the central and northern urban areas being more prone to dengue.

There appears to be widespread knowledge that mosquitos transmit malaria, and that sleeping under a bed-net is protective. However, it may be difficult for young people to turn this knowledge into action: working in plantations and during the night in the forest leads to frequent cases of malaria amongst rural and off-road rural males, particularly in southern provinces.

Dengue was predominantly of concern in the more populated urban settings in major cities, with young people working in restaurants being concerned about exposure during the day to mosquitoes carrying dengue.

Treatment is available for malaria through health clinics, hospitals and from village health workers, although young people mentioned that sometimes there is no stock available at the time the treatment is needed.

Superstition about the causes of fevers continues to be apparent amongst ethnic minorities in off-road rural settings.

3.2.5 Water and food-borne illness

Illness arising from lack of hygiene, and lack of access to clean water contributes significantly to morbidity in Lao PDR. It was clear from the FGDs that diarrheal diseases were problematic in all provinces and in all geographic regions. Lack of knowledge about hygiene, and the continued consumption of raw food contribute to the perpetuation of diarrhoeal diseases and parasitic illness in Lao PDR. In addition, some rural communities do not have improved water systems, and people therefore continue to consume river water, or poor quality dug-well water. Rural and rural off-road groups identified kidney and bladder issues as being caused by the consumption of poor quality water.

Some groups, particularly the two younger age groups of girls (10-14 and 15-19 years), were aware of the "three cleans": eat/drink clean, live clean, and be clean. These are hygiene standards taught in primary schools, which have improved basic hygiene knowledge by encouraging hand washing before food preparation and before eating, eating only cooked meats, and drinking water that has been boiled and safely stored, and awareness of the dangers of open defecation and mosquito breeding in spreading disease, and the need for personal hygiene, and clean clothing.

3.2.6 Accidents and injury

Road traffic accidents were expressed as a concern in rural and urban settings, and are particularly linked to drug and alcohol-induced risk-taking in young men. Accidents and motorcycle racing were identified as a major issue by all age groups of young people and by village leaders and parents. Road traffic accidents are the primary cause of death for young people between the ages of 10 and 24 years.⁸⁹

⁸⁹ WHO (2007). *Youth and Road Safety*.

In rural off-road villages in Savannakhet province, lingering issues from the Unexploded Ordnance (UXO) were identified as a source of injury for children. This is a geographically constrained problem, and one of Lao PDR's unique MDGs. Electrocution was also occasionally mentioned as an issue, caused by fallen wires and poorly installed services.

3.3 Barriers to prevention and care

In the FGDs, there were many reasons mentioned why young people were unable to access the prevention and treatment services that they need to improve and maintain their health (see Annex 9), in terms of accessibility, acceptability, equity, appropriateness and the effectiveness of health services.

Some of the barriers are factors that affect all groups in the populations, for example the lack of health facilities in some places, particularly off-road rural areas, inadequate equipment, drugs or service providers, and reliance on traditional remedies; some are barriers that affect all age groups but may be particularly important for young people, for example lack of money for transport or for paying for health services, lack of bed-nets or lack of knowledge, including sexuality education; and others may be specific to young people, for example social attitudes and the attitudes of health workers to sexuality among young people, which affect prevention (e.g. access to condoms) and treatment (e.g. access to STI treatment). Health care is not provided free of charge in Lao PDR.

Treatment is the most difficult when you have a fever, hospital is far, some have a vehicle, some don't have; some die because they can't reach the hospital.
Male (15-19 years), rural

Sometimes we have to use a boat, but we don't have money to go.
Female (20-24 years), rural

In addition, the cost of transportation to distant health facilities is prohibitive for those in rural settings. Without sufficient money to pay for care, and for medications, young people go untreated, turn to traditional healers, or self-medicate with medicines that are available in

the marketplace. In ethnic areas, health staff may be unable to speak the language of the local population, which limits ethnic young people's access to health care. Lack of trained staff also affects the quality of care received, limiting the perceived value of seeking care. Lack of adequate equipment and supplies also hampers the ability of health staff, regardless of their training level, to deliver effective services. In terms of prevention, many

Sometimes it rains and can't reach Health Centre, so stay sick at home.
Male (20-24 years), rural

No use to have health insurance because there are not enough drugs.
Female (20-24 years), rural

factors work against young people at an individual level (e.g. lack of education, lack of health education) or at an environmental level (e.g. poor access to water, lack of awareness or enforcement of traffic laws, social values and norms, work conditions).

3.4 Conclusions

1. Key health problems affecting young people include: sexual and reproductive health (early pregnancy⁹⁰, abortion, STIs), common endemic diseases (malaria, dengue, diarrhoea), injuries (road traffic, interpersonal violence), lack of hygiene and other risk-behaviours (use of alcohol, psychoactive substances, predominantly *yabaa*, and tobacco).
2. Cultural and societal factors influence risk behaviours and the motivation of youth who engage in them. *Yabaa* is used to facilitate work in rural communities (with apparent acceptance) but for recreation in urban settings where it is seen as dangerous. Early child bearing is not perceived as unusual and therefore Lao PDR has the highest adolescent pregnancy rates in the region. The acceptance of the use of alcohol in Lao society also creates serious risks for young people. Changing attitudes toward these health risks cannot be the sole responsibility of one sector.
3. Many of the positive advances occurring in Lao PDR have a direct deleterious effect on health. This includes the opportunity for migrant work, increasing exposure to infectious diseases for those who leave home to work, and for those who are host to migrant workers, the expanded access to road networks and more powerful vehicles which contribute to serious road traffic accidents, and growing awareness of other cultures whose lifestyles may negatively influence Lao PDR's young people's desire for experimentation.
4. Lack of access to health services is not the only barrier to accessing services. The need for payment, the attitudes of health workers, and the perceived lack of confidentiality also discourage youth. Reliance on traditional healers persists in areas where access to other health services is limited.
5. Condoms, while generally available, are an infrequently used form of contraception between young men and women (other than service women). Since other forms of contraception are unavailable, unwanted pregnancy occurs, resulting in illegal abortions in Lao PDR, or neighbouring countries, or use of unregistered abortion pills of unknown quality, and without adequate medical supervision.
6. Young people receive very little explicit mention in health legislation or policy/programme documents other than assigning their age of legal consent.
7. Service providers do not appear to receive specific training in responding to the unique needs of young people. As a result STIs, in particular, are often untreated in young people who are reluctant to discuss them with health providers. While non-governmentally funded programmes may be available, particularly relating to sexual and reproductive health, they are geographically limited, and/or narrowly focussed on selected populations.

⁹⁰ It is interesting that early marriage was not perceived as an issue either in the FGDs or the KIIIs with village leaders and/or parents.



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IV Education

The level of maternal education is linked to the survival, nutritional status, health, and school completion of her children.⁹¹ Education, particularly of young girls who in less than a decade may become mothers of the next generation is the single most important determinate for the future.

Quality education is essential to students' right to education, and includes all of the following actions:

- Ensuring the teaching ability of teachers to engage and retain the attention of young people;
- Developing a curriculum that prepares students for a successful future with the life-skills, technical and creative-thinking skills they need;
- Building a setting that is safe, clean and affords students access to essential facilities including sanitary facilities, a place to play and engage in sports, and protection from the elements.

This analysis, and other data makes it clear that education in Lao PDR does not always fulfil these criteria.

4.1 Education-related policies and programmes for young people

Despite a mandatory requirement for primary education in Lao PDR, completion rates for those entering primary school were 65% in 2012. The average number of years of schooling in Lao PDR is 8.8 for males and 7.6 for females. Across the nation, just under half of children (44.6%) of secondary school age (11-17 years) are attending secondary school; 25% are still attending primary school while 30% are not attending school at all.⁹²

Article 6 on the Rights of Citizens to Education (Education Law 2007) addresses the promotion of education in terms that all citizens, regardless of ethnicity "origin, religion, gender, age and socio-economic status", have a right to primary education, which starts from age 6 (*Article 17*). [Secondary education is optional, and not available in every setting]. Results from the primary data suggest that some rural off road villages, particularly those of ethnic minorities, lack access to school. *Article 18, 20* and *22* set out the term for primary (5 years), lower secondary (4 years) and upper secondary (3 years) education. Vocational education has three levels ranging from 6 months to 3 years. University degrees require a minimum of 4 years of study.

The right to education is further clarified in the Law on Protection of Rights and Interests of the Child (2007). As one of the 10 rights of children, in *Article 3* the right to obtain education is protected. *Article 30* makes clear that young people living with disabilities have the same right to education and vocational training without discrimination. Through the Policy on Inclusive Education (2011) the government promotes and creates conditions for disabled children, and encourages private sector, Civil Society Organisations (CSOs) and domestic and international organisations to support education for disabled children and young people.

Education is also supported through LYU. The Law on Lao People Revolutionary Youth Committee, Lao People's Revolutionary Youth Union Law (2009), *Article 9* on Rights and Duties, states that the main right of Lao People Revolutionary Youth Committee is to educate pioneers (9-15 years old) and youth (15-35 years old) on political ideology and solidarity as well as to protect interests of youth and pioneers by strategic planning and developing a youth and pioneer development plan.

The Ministry of Education and Sport, more than any other ministry, is directly responsible for young people. In its current plan the MoES prioritizes universal access to primary school education. The MoES has a

⁹¹ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.

⁹² *Ibid*.

strategy for education reform that will increase the number of years in lower-secondary school from three to four years. The Education Administrator Development Institute has been established to address increasing the capacity of teachers. The MoES plans to develop the education and training system to international ASEAN standards, although there is currently no action plan for implementing this strategy.

MoES's Education Sector Development Framework (2009-2015), seeks to improve access to basic education for girls, children with special needs and children living in remote areas. Unfunded plans for expansion include equivalency and re-entry programmes for school dropouts and unemployed youth in both urban and rural areas. Infrastructure expansion is planned (also currently unfunded) to increase the number of primary, lower- and upper-secondary school classrooms, and strengthen secondary vocational education in the poorer and most underserved districts.

The MoES is also responsible for Technical Vocational Education and Training (TVET). According to the MoES, only one third of the enrolment quotas for TVET are filled. This is believed to be due to widespread undervaluing of TVET compared to university education, despite greater demand and opportunities for technicians in agriculture, construction and mining compared to higher education graduate positions; such sentiments are backed by ILO, LYU and the focus group discussions with young people, their parents and leaders.

The MoES has incentives for TVET, such as no entrance exam and a student allowance, although these do not appear to be effective in increasing enrolment. Supportive legislation, broader dissemination of information, and initiatives promoting TVET amongst grade 4 and grade 7 students are needed. To this end the MoES is drafting a law on vocational training that will be submitted to the National Assembly in late 2013. Another strategy being piloted at six schools is a Secondary Vocational School programme, in which time is split between general education (60%) and vocational training (40%), such that students are qualified for certain professions at the completion of upper secondary school.

Educational programmes are also the focus of local and international agencies working in Lao PDR. In the programme review conducted for this analysis, a total of 21 programmes were focused on education (including health education) or skills development. These were varied in nature, and included: programmes integrated into the formal education system, such as the *life-skills based curriculum project*, and ILO's *Know About Business* programme in selected secondary schools; non-formal education aimed at enhancing learning opportunities for out-of-school youth and other vulnerable populations, such as the *Mobile Teachers Programme*; and informal education programmes aimed at educating targeted populations about specific issues, such as the *preventing road accidents and disabilities* programme. Education and skill development programmes included six of the seven national programmes and generally had high coverage.

Skills development programmes were largely based on vocational training, such as those offered through *Peuan Mit* and the *Anti-Human Trafficking Unit*. Alternatively, a number of programmes focused on broader life skills, such as the various radio programmes. The reviewed programmes offering vocational training were targeted to vulnerable groups: street children, women and children who have been trafficked, female sex workers and marginalised women. In addition, although not reviewed, a number of vocational training and technical skills centres are operated nationally, either implemented by or in partnerships with the *MoLSW* (n=4), the *Department of Technical and Vocation Education*, the *MoES* (n=21) and the *Vientiane Capital Women's Union* (n=2). This includes ten centres in Vientiane Capital and 18 other centres nationwide.

4.2 Education Situation

4.2.1 Enrolment and Literacy rate

Across the documents reviewed, estimates of literacy and enrolment levels in Lao PDR vary. In 1992, 58.8% of Lao youth had been enrolled in primary school, and 47.7% who were enrolled reached the final year of primary school. As of 2012 figures from the *MoES*, 95.2% of youth have enrolled in primary school,

and 70% reach the last grade of primary. In that time frame, literacy amongst 15-24 year olds (males and females combined) only increased from 71.1% to 73.1%. The 2012 LSIS found that over two thirds of female youth (aged 15-24 years) and three quarters of male youth of the same age are literate. Literacy rates are slightly higher for those in the 15-19 years age group than for those in the 20-24 years age group, suggesting that the national literacy rate may be improving (see *figure 4, Annex 3*). Literacy rates were also found to be positively correlated with socio-economic status, and Lao-Tai ethnic groups have much higher literacy levels than Chinese-Tibetan groups.⁹³

4.2.2 Educational Disparities

Nationwide, there is no overall gender disparity between boys and girls attending secondary school. However, important disparities do exist in some sub-groups of the population; the secondary school educational disadvantage of girls is pronounced among children living in the poorest households (Gender Parity Index 0.66 girls/boy), and among children in Hmong-Mien headed households (Gender Parity Index 0.73 girls/boy).⁹⁴

Information gathered from young people in this study identifies that in rural and rural off-road settings, education often has a lower perceived value since slash and burn, or rice paddy farming and animal raising are the main occupations. For boys, progression to a lower secondary school education is possible if their parents can afford the costs of school supplies, suitable clothing, and transportation to school is available.

For girls, particularly those from ethnic minorities in rural and rural off-road settings, there is no opportunity to attend school beyond a primary education due to cultural resistance to sending girls away to school, and the perceived lack of benefit to their families and communities of further education.

In a setting where early marriage and early child bearing are the norm, there is not a strong motivation to educate girls beyond primary school. Some rural girls included in the FGDs did, however, indicate that they would have liked to have continued with school if there were both funding for them and a mechanism for them to attend secondary schools even when there are none close to their villages. In the FGDs with parents

Most of the girls age 14-19 help their parents, some drop-out to marry, to have a husband, they have to plant tea. Male (20-24 years), rural

and village leaders, young people with disabilities were explicitly mentioned, including highlighting their inability to access education beyond the third year of secondary education, and issues of discrimination.

In general, secondary school and even higher education is much more attainable, and desired in urban settings than in rural areas which is reflected in the higher proportion of children attending secondary school in urban areas (see *figure 3, Annex 3*).⁹⁵ People interviewed in rural and rural off-road settings are less attuned to the benefits of education beyond basic literacy, which is seen as necessary to obtain certain types of factory work.

4.2.3 School Attendance and Drop-Outs

Young people in the FGDs who attend or have attended school identify very positive aspects that they enjoy, particularly sports in the case of the boys. The girls mention the social aspects of school, and when their school premises are pleasant and clean, they enjoy their time there, including their interaction with teachers, playing games and their responsibilities for keeping the schoolyard and classroom clean. The opposite is also true: where poor quality, unhygienic school yards and classrooms are present, and where teachers are rough disciplinarians, or lack motivation to teach, young people dislike attending school: girls were more vocal than boys in expressing this difference.

⁹³ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.

⁹⁴ Ibid.

⁹⁵ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.

Small house, poor family, nobody to help with the slash and burn. More girls drop than boys. Male (20-24 years), rural

A 2009 study of obstacles to school attendance found that the two top reasons that children leave school are low parental income (23% of school drop-outs were found to have parents whose income was lower than 200,000 Kip/month), and long distances between their home and school (22.5% of drop-outs reported having to had to travel more than 10 km to get to school).⁹⁶

Data from FGDs with young people identify a key time for dropping out is at the age of entering lower secondary school. By the age of ten years in rural and rural-off road communities young people are already seen as an important source of labour for the family farm, so their help may be need (particularly in the case of boys).

Girls in rural and rural off-road settings may also be asked to remain at home from school to care for younger siblings. Rural young people drop-out to work in factories, and young people in rural off-road communities to marry and work in the family farm. Pregnancy, which often leads to marriage, is another reason for young people to drop-out.

The youth age 14-15 are grown enough to get married. Parent, rural

Girls have a risk when she is pregnant. She drops out. Male (20-24 years), urban

In urban areas dropping out tends to occur later, once lower secondary school is finished, and boys, in particular, start to spend time with friends, play computer games, and are more easily influenced by peers who have already left school. Those who are not obtaining passing grades also drop-out. This may particularly be a problem for young boys

whose parents are both working and who are not actively supervised and supported to continue in school. Urban boys and girls may be kept at home to help with family businesses if their performance in school doesn't indicate they will be successful with further studies: monetary constraints are balanced with out-of-school opportunities for income generation for 15-19 year old urban youth.

Have to stay in same class so drop to do business (selling). Female (15-19 years), urban

Some drop (boys) because of drug use. Female (20-24 years), urban

Drug addiction was also mentioned in both urban and rural settings as a reason for dropping out of school. Young males in the 15-19 year age group are most vulnerable to this, and the decision to drop-out may either be related to selling drugs to make money, or because of the effects of *yabaa* on their ability to function effectively in school.

In all geographic settings, peer pressure was frequently expressed as a concern by parents, who stressed that the influence of other young people creates a pull to engage in activities they don't condone, including dropping out of school, racing, and drug use for boys and early engagement in sexual activity for girls.

4.2.4 Access to higher education and vocational training

Access to a university education, or even vocational training is out of reach for most young people in Lao PDR. The 2010 Labour Force survey reports that only 2.95% of all persons aged 15-64 years have received some form of vocational training.⁹⁷ For those aged 15-19 years, the most common forms of vocational training undertaken were hairdressing, sewing and foreign languages. For those aged 20-24 years, the most common forms of vocational training were driving instruction and computer/software training.

Focus groups with parents and young people helped to identify reasons why vocational education may not be preferred by those who can afford it. Village authorities note that parents encourage their children

⁹⁶ Centre for Inclusive Education and ADB (2009). *Obstacles to school attendance and strategies for increasing the number of children in schools*. ILO, MoLSW, MPI (2010). *Labour Force and Using Child Labour Survey*.

⁹⁷ ILO, MoLSW, MPI (2010). *Labour Force and Using Child Labour Survey*.

to seek a university education and a possible high party position, rather than supporting them to obtain a vocational education that would offer them much more certainty of employment as a skilled labourer. Those young people without access to tuition or educational support money, and who would gladly attend a vocational programme, often do not have the requisite basic education to enroll.

Several KIIs with government officials again mentioned the problem of young people being encouraged by their parents to obtain a university education, with the aim of obtaining government careers that they might not necessarily embrace, when the high demand is for people with vocational skills to work in the industrial and agriculture sectors. MoES is therefore trying to decrease the focus on Bachelor Degrees and to emphasize training for skills that match the jobs available.

Children with good score can't continue to study if they don't have a contact.
Village Authorities, urban

There is much concern about the need to meet ASEAN standards in time for entry into the ASEAN economic community. This is recognized as a challenge, particularly for rural young people who lack the resources for either formal education or vocational training.

Only the first or second in class can continue higher education.
Female (20-24 years), rural

The costs of tuition, transportation, clothing, books and accommodation effectively limit post-secondary education to only the most wealthy in Lao PDR. LSIS data also supports the correlation between urban setting, wealth quintile and maternal education levels (see *figure 3, Annex 3*).⁹⁸

Some fortunate young people may be eligible for scholarships to attend university, but the discussions in the FGDs indicated that this is rare: only a few students per district might be fortunate enough to have support for tuition and living expenses. For others, the lack of connections may limit their ability to find additional support. It was not clear from the primary data collection whether girls would be able to accept such scholarships if this required them to live far away from their families.

FGDs with university students, and other young people in rural and urban settings stated that there is a lack of connection between the educational and vocational training programmes available in Lao PDR, and the types of jobs that are available in the marketplace. Young people felt their education did not prepare them in the ways they had hoped.

I am trained as an accountant, but the only jobs are for Maeban, so I don't find work.
Female (20-24 years), urban

4.3 Barriers to Education

There are many barriers to education in Lao PDR (see *point 3, Annex 9*). Lack of education is a cycle that is perpetuated by the same ethnic, economic, and health disparities that influence other aspects of life in Lao PDR. Maternal education is strongly correlated to child survival, early child development index score, and school readiness and so the lack of maternal education in the past continues to perpetuate it into the future.⁹⁹

After they have finished primary school, they have to go to secondary school, but there is no dormitory.
Male (15-19 years), rural

FGDs in rural areas identify the absence of schools as a barrier, but even if schools are available the physical conditions may decrease young people's attendance - for example, the lack of sanitation facilities in schools may limit the ability of menstruating girls to attend school, and may also contribute to the ill-health of students. Lack of boarding facilities also prevents rural and off-

⁹⁸ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.

⁹⁹ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.

road rural students from attending school, and distance from school creates an important barrier for young females who would not be permitted to stay away from their families to attend school.

Poor health may be a factor, either of the young person, in which case it may limit attendance or cognitive capacity, or of his/her parents, who may require the young person to drop-out of school to care for them, or to work to support the family. Pregnancy is also an important cause of dropping out of school for girls.

Sometimes are sick and drop-out.
Female (15-19 years), rural

Socio-cultural barriers play their part, including the ethnicity of students in comparison to that of their teachers, and the lack of support to attend school for ethnic children whose parents may place little value in education.

4.4 Conclusions

1. There are many obstacles to young people staying at school: lack of money, lack of parental support, lack of conviction by children and parents that education is beneficial to their future success, competing activities and priorities such as work, looking after siblings, marriage; and concerns about the physical infrastructure and distance. In order to address this issue young people's access and desire to attend schools must be increased, particularly for girls in rural settings.
2. At a higher education (university) may falsely be seen as more valuable than obtaining vocational skills. There is a need to further strengthen and promote vocational training in Lao PDR.
3. Schools may provide an important setting for contributing to young people's health through skills-based health education, the development of school health services¹⁰⁰, improved water and sanitation facilities, and opportunities for data collection about risk behaviours (Global Student Health Survey, GSHS currently planned).
4. Improvements in young people's health (treating helminthic infections, decreasing early pregnancy, decreasing substance use, improving nutrition) may make important contributions to retention and academic performance.
5. Although there has been significant progress in achieving gender equity in relation to enrolment and retention in school, important gender disparities still exist in terms of secondary education in some off-road and ethnic communities.
6. There is a need for strong linkages between the education and employment sectors to ensure that all young people, regardless of gender, disability or ethnicity are able to benefit from the growing opportunities that will arise in the region and the school to work transition is effective.

¹⁰⁰ The only health service in schools for the moment is some iron supplementation (here and there as provided by various donors), and treatment for parasitic infections. There is no "school health service" per se.



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5

V Employment

5.1 Employment-related policies and programmes for young people

Lao PDR joined *ILO* as a member state in 1965. However, due to regional conflict and internal issues the country could not participate actively until the late 1980s. The *Ministry of Labour and Social Welfare* was created in 1993. This Ministry has two strategic plans: the Labour Development Strategy and the Social Welfare Strategy. Neither strategy specifically identifies young people, but the Ministry recognizes that young people make up a large percentage of the workforce.

The Law on Protection of Rights and Interests of the Child (2007) defines in *Article 83* re-education as the punishment for employing children under age 14. This same punishment is exacted for “behaving as bad example for children”, and “other violations that are not serious in nature as prescribed in this law”.

Article 41 of the Law on Labour (2007) addresses child labour, and sets a legal age for employment of at least 14 years of age and less than 18 years of age, provided that they do not work for more than 8 hours a day and are not employed in sectors involving the performance of heavy work or that are dangerous to their health. This includes all types of mining and work in tunnels or underwater; production activities that use chemicals, explosives or toxic substances; work involving the handling of human corpses or risk of exposure to communicable disease; overtime time, or work at night from 22h00 to 05h00; work in environments with excessive noise or vibration; or work in places serving alcohol or with gambling.

There is disparity between the Lao legal minimum age for admission to employment (14 years) and the age of completion of compulsory education (11 or 12 years). This disparity creates a situation whereby children who no longer are obligated by law to continue with their schooling after completing their compulsory education start automatically begin working illegally before attaining the minimum age for admission to employment.

Only three programmes were identified targeting young people and employment. This included *Peuan Mit*, a small-scale programme providing business opportunities and employment placements for street children and youth and vulnerable women; and the Supporting Talent and Entrepreneurial Potential (STEPS)- programme, which promotes entrepreneurship in young people and has set up two centres for career counselling and job placement. MoLSW has set up a network of nine employment services job centres (ESJCs) in 9 provinces of VTE capital, VTE province, Borikhamxay, Khammoun, Savannakhet, Champasack, Xaiyaboury, Oudomxay, Luangprabang. The ESJCs are mainly responsible for job matching, referrals, and placement and assisting employers but have no youth-specific focus.

Young people in all FGDs identified the lack of employment opportunities as a concern so there is a need for more youth-focused employment initiatives, or greater awareness that services are available to them, particularly in urban areas where work as part of the family farming unit is not available as an option.

Numerous Vocational Training Centres are run nationwide under the MoLSW and the Vientiane Capital Department of Labour and Social Welfare, as well as by the LWU and LYU organisation. Training occurs in numerous trades such as electrical trade, processing, garment manufacturing, carpentry, information technology, and automobile mechanics. In the past two to three years, Vocational Training Centres have trained 88,000 people, of which the majority were young people. The vocational training strategy plan will be evaluated in 2015.

In Lao PDR, the ILO works with the MoLSW, Chamber of Commerce, and the Industry and Trade Unions. The ILO does not directly engage or target young people, but its work benefits young people. A major role of the ILO is creating a National Labour Standard that will comply with ASEAN standards and which promotes social protection and safe migration. In the future, ILO will engage in standards development,

including fair income and safe working conditions.

Social health insurance and social protection aims to cover fifty per cent of the population by the end of 2015 (currently it only covers 25%).

5.2 Employment Situation

The proportion of young people in the Lao labour force is high; of people aged 15-19 years, just less than half of the population is in the labour force (43.5% of males and 54.3% of females). In the labour force as a whole, the percentage of currently employed females is more than the percentage of currently employed males in the age group 15-24 years (although this changes in the 25+ age group), indicating that females enter the work force at a relatively younger age than males.¹⁰¹ Family financial issues can push children out of school and into work; a study of child labour in the brick sector found children as young as 9 years old working in brick factories in Vientiane Province.¹⁰² Another study found that out-of-school children aged 14-17 years commonly work more than 48 hours per week.¹⁰³ One report recommended the development of a set of indicators for monitoring and combating child labour, as well as complementary income generation programmes so that households do not have to send their children out to work.¹⁰⁴

Boys work in the stone table factory, work as construction worker, girls will work at garment factory.
District Authorities, rural

The majority of the population in Lao PDR live in rural settings, and farming, including rice paddies, slash and burn farms, vegetable gardening and animal husbandry are the main sources of income for most families. Focus groups in rural areas mention that increasingly in the rural areas there are factories (e.g. Nikon camera factory, garment factories, tobacco factories) that are

seeking unskilled labourers, and within villages there may also be additional work, such as house construction. In a few rural areas, mining installations, such as the Sepon mine in Savannakhet, may hire and train young people. However, for many young people living in rural areas, a lack of secondary school education and low literacy may preclude them from obtaining work in large projects like mining or road/dam construction.

Laos labour capacity is below others, they are unskilled labour, cannot work with cement, cannot drive a vehicle.
Village Authorities, urban

People get malaria because they enter the forest to get rose wood.
Village Authorities, rural

For those young people not working on family farms, focus groups identified other types of commercial farming opportunities, including tea, eucalyptus, rubber, coffee, sugar cane, and taro plantations. Products that can be obtained in the forest also provide an agricultural income to rural and off-road rural young people, who harvest cardamom, rosewood, bamboo shoots, rattan and mushrooms. Working legally, or more often illegally to identify and harvest rosewood is a source of income for young males in southern provinces, who enter the forest at night to cut down and load trees (putting themselves at risk for malaria).

Rural and urban young people may be successful in obtaining work as hotel workers or restaurant staff in the growing hospitality industry. For young people, male and female, with knowledge of a foreign language (English, French, Chinese, Korean), this can offer stable employment with future prospects.

¹⁰¹ ILO, MoLSW, MPI (2010). *Labour Force and Using Child Labour Survey*.

¹⁰² MLSW and National University of Laos (2004). *Child Labour in Lao Brick Sector*.

¹⁰³ National Statistics Centre, IoM (2010). *Child Labour Survey*.

¹⁰⁴ MLSW and National University of Laos (2004). *Child Labour in Lao Brick Sector*.

Mainly work for hotel, some who know some language can work in restaurant, some work as worker, carry cement.
Parents, urban

Urban youth said they are working in retail settings: in markets, ITECC and other large retail environments. Urban male youth are more likely to describe businesses like mobile phone sales, or other technical sales, whereas urban female youth sell a variety of things in retail settings.

Only in rural and rural off-road settings are handicrafts seen as a possible source of income. As a pastime, as well as an opportunity to earn extra money, young females may have received training in weaving through their family traditions, or through vocational programmes. Hand woven garments continue to be the normal attire for women in Lao PDR, supporting an industry of talented weavers and seamstresses.

Weaving, under LWU, LYU doesn't have this type of training.
Village Authorities, urban

Young males in rural settings frequently mentioned day labour, short-term work carrying or moving equipment and supplies. Young people as young as 10-14 years may find employment opportunities providing water for construction sites (for mixing cement) and both young males and females mention this activity. The heavier labour, carrying bricks, bags of cement and lumber for construction is most commonly the work for young males aged 14 years and older, due to the physical requirements for this type of work.

5.2.1 Gender Differences

Focus groups in all areas describe gender differences in types of work available, in most cases reflecting the physical demands of the jobs: young males take on work in construction and other labour while young females are more likely to work (often unpaid) in support of domestic duties around the house. A range of restaurant jobs is available to young people, both male and female. Much plantation work is open to both young males and females, as is work in the rice paddies and slash and burn settings. Work in certain factories may not be available to illiterate young people, who are more likely to be female, but female workers are able to find work in garment factories.

Women do not have knowledge; they go to [abroad].
Female (15-19 years), urban

Many young people subscribe to **traditional views on gender roles** in terms of employment, in both urban and rural settings. Urban females obtain work as beer girls and as waitresses in restaurants, and in retail; in rural settings they work alongside their families in farming activities, or as vendors in the market. Urban males work in factories, plantations and in construction, and generally can earn more than female young people. Rural males are looking for work, either in farming, factories or construction. Rural and urban youth, both male and female, may opt for migrant work, placing both young men and women at risk for exploitation.

5.2.2 Migration

If we cannot find a job, we go to another province.
Male (20-24 years), urban

Migration is a challenging issue that places both male and female young people in vulnerable conditions both within the country, and in neighbouring and distant nations. Driven by lack of employment, the lure of distant opportunities may open youth to the potential for human trafficking, health risks, and protection issues when their status is not legal in the country where they are working. Although human trafficking affects both young men and young women, females receive greater focus because of the risk of sexual exploitation. According to key information interviews with UNODC, the labour conditions for young men are as significant a risk to their health and safety as the more well-publicised and acknowledged risks to young women.

Access to work in Lao PDR varies by season, province, and by rural/urban settings. The presence of large employers and retail settings also varies by location, making it necessary for young people to migrate

internally and internationally to obtain work. Young people seeking work frequently need to move. Although this is particularly true for young people who come from rural settings, even urban young people in major cities identified the need to travel to other areas of the country to find work in factories, sales settings and hospitality work.

*In our village 5-6% go abroad, work in garment factories and construction site.
Female (20-24 years), rural*

International migration is most frequently to Thailand, for both rural and urban young people, although less so for those from rural off-road settings.

Female young people interviewed mentioned others lured by work as housekeepers (*maeban*) but who ended up being trafficked as sex workers. Young men said they could go to work on plantations and in factories in Mukdahan, Thailand, bordering Savannakhet Province. They travel to work for 3-4 months and return for holidays; some rural young people only travelled once to Thailand to work, and then returned to work with their families on the farm.

Because agents often lure young people to work in Thailand, the young people involved may not be aware that they are working illegally.

*You go yourself (illegally);
You make official papers and
you go legally.
Male (20-24 years), rural*

This results in some being sent home by Thai authorities, and places both male and female young people at risk. Rarely, young people travel to other locations, including Malaysia, and China, for construction and factory work; those young people with relatives in North America or Europe may also have opportunities to travel there for work.

These findings were backed up by a more recent qualitative study looking at young female migrants working in garment factories: in addition to limited knowledge about sexual and reproductive health, these young women were found to face challenges related to managing money (accessing loans and banking facilities, understanding salary payments and sending remittances home), as well as suffering from abuse by managers and having numerous barriers to healthy eating and nutrition.¹⁰⁵ Overall, young migrants were found to be ill equipped for moving to cities and in need of 'life skills' training. The report advocates for the initiation of better compliance frameworks in the garment industry and the development of robust peer support networks within factories.¹⁰⁶

Young women, especially young **migrant women**, tend to be involved in high-risk employment. This includes the entertainment and sex industries, where levels of abuse and exploitation are high and formal support services are few and far between.¹⁰⁷ In a UNICEF-led rapid assessment involving interviews and focus groups with a total of 72 young people at risk of HIV, including drug users, sex workers and LGBT youth, young people described a lack of options in education, employment and sustainable opportunities to generate income. Migrating to urban settings to look for work and send money back to their families was universally reported, but insufficient financial resources for general living costs was a widespread problem. The majority of young people interviewed expressed the desire for a better quality of life.¹⁰⁸

¹⁰⁵ Care, AusAid and the Lao Women's Union (2012). *Sewing the Line; A qualitative baseline analysis of the risks and opportunities posed for young women by migration from rural Laos to Vientiane for the purpose of employment in the garment industry.*

¹⁰⁶ Idem.

¹⁰⁷ CARE (2009). *Just Beginning: A qualitative baseline analysis of the risk of abuse and exploitation of sex workers in Vientiane Capital and subsequent access to legal services.*

¹⁰⁸ UNICEF Lao PDR and the Ministry of Health (2011). *Rapid Assessment: Most-At-Risk Adolescents and Young People to HIV in Lao PDR.* Bangkok.

5.3 Barriers to employment

Unemployment rates for younger people (15-24 years) are higher than for those aged over 25 years. This is true in both urban and rural areas, although in urban areas the difference is much larger, with unemployment of 15-24 year olds running at between 6 and 7.5%.¹⁰⁹ This suggests that unemployed urban youth might be in particular need of attention.

The FGDs identified many barriers to young people accessing decent work (see *point 4, Annex 9*), not the least being early family formation, poor health and lack of the education and training that is usually a pre-requisite for obtaining the best jobs with good future prospects. Furthermore, without the training or financial support to start businesses of their own, less educated young people are limited to following in their parent's footsteps, or to working in poor paying unskilled labour positions.

*Difficult to find work because of low education level.
Female (15-19 years), urban*

*Even if they finish University, it is difficult to find a job if you don't have money.
Parents, urban*

All authority groups acknowledged that not only is there is a lack of jobs, but that young people often do not have the skills required (e.g. driving, construction skills) for those jobs that are available. Although there are many available jobs for skilled labourers through government concessions for road

construction and mining, there is little benefit to Lao youth because foreign workers fill the skilled positions in the absence of qualified candidates from Lao PDR.

Many stakeholders identified that the main challenge in employment for young people is the lack of demand for vocational education, with preference for university programmes. Although there is a serious lack of technicians in many fields, including agriculture, construction and mining with intense demand for hiring, there is no market for many university students once they graduate. Students interviewed, even those graduating from university indicate that their programmes are not aligned with the opportunities available for work in Lao PDR.

5.4 Conclusions

1. Employment opportunities vary significantly between urban, rural and off-road locations, and between boys and girls. There is a mis-match between the young people available for work and the types of work available for young people (both males and females). There are too few trained young people for the jobs that are available and a lack of information on job recruitment for un-skilled, or low-skilled work.
2. Subsistence-level work is available in off-road/rural communities, but is often not remunerated (including the collection of resources in forests for sale). However, many of the more traditional employment opportunities do not provide young people with opportunities to move out of the poverty cycle.
3. Young people do not feature prominently in existing legislation and strategies for increasing employment in Lao PDR, despite the fact that they are a significant component of the workforce: there is nothing that specifically protects the allocation of certain jobs for young people.
4. Young people are migrating within and outside Lao PDR in neighbouring countries without adequate safeguards for their health, and legal status requirements.

¹⁰⁹ ILO, MOLSW, MPI (2010). *Labour Force and Using Child Labour Survey*.



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6

VI Protection

The concept of protection of youth in this situation analysis includes their physical, mental and legal safeguarding, both through regulation by the Lao PDR legal framework as well as traditionally by authorities and duty bearers who are responsible for disciplining youth, and ensuring their safety.

6.1 Protection-related policies and programmes for young people

The Law on Protection of Rights and Interests of the Child (2007) identifies far-reaching areas where children (defined as those under 18 years of age) are subject to protection by the law. *Article 2* identifies children rendered vulnerable by their status as orphans, or half-orphans, those who are abused, neglected, exploited, addicted to drugs, or suffering from HIV as protected by this law. Additionally, disabled children, defined as those who are “not whole in body, mind or spirit” whether from birth or later in their lives are specifically included, and the state’s responsibility to provide “free learning and providing the necessary materials, assistance and exemption of fees to support disadvantaged children, children in remote areas, and children from poor families” (*Article 29*), “and shall have access to vocational training” (*Article 30*). In *Article 3* the law sets out the rights of the child and the responsibilities of the state, society, parents and guardians.

Article 8 states that the primary responsibility for the state is to formulate policies on education and building the capacity of children to ensure that children are patriotic and love the nation. Under *Article 9* society’s primary responsibility is to contribute to the physical and mental building and development of children, especially to participate in building facilities for treatment and education and “[to contribute] in the protection of children from various social shortcomings”. *Article 48* prohibits children from using narcotics, drinking alcohol, beer, smoking, and other narcotic substances. They are prohibited from serving in nightclubs, guest houses, hotels and restaurants and using the services of those establishments in “wrongful ways”. Pornography, gambling, and their use of weapons are all clearly prohibited under this law. Referring to *Article 49* parents, guardians and other persons are prohibited from injuring or insulting children, allowing them to work in prohibited settings, or access prohibited substances. Allowing children under 18 to enter restaurants that serve alcohol or other intoxicants, advertising alcohol or cigarettes near schools or community areas, and “being bad examples for the children” are clearly prohibited.

Children under the age of 15 do not have “penal responsibility” and are not tried under the Penal Code. *Article 53* of Law on Protection and Rights of the Child states that there are four sectors offering non-court solutions, village child mediation units, District or Municipal Justice Offices, Investigational Agencies, and the Offices of the Public Prosecutor. Juvenile Courts *Article 69* deal with criminal cases committed by children; cases concerning child labour; civil cases relating to children; and other cases relating to children.

Article 74 states that “child offenders sentenced by the court [...] will be sent to vocational training centres for child offenders” and sets out the rights and duties of those institutions, and the rights and responsibilities of the children placed there.

The Law on Civil Procedure, *Article 60*, discusses the power of Juvenile Courts to consider complaints against juveniles (defined by the courts as children under 18 years of age). *Articles 53* and *114* require that if children under 15 years of age are summoned to appear before the Court, the summons must be directed to their parents or guardians. Young people over 18 years of age are tried as adults.

Chapter 6 of the Penal Law (2005) deals with offenses related to marital relationships and traditional norms. *Articles 128 through 134* govern the fines and punishment for the offenses of rape against children and trafficking in persons. *Article 129*, for example, states that any individual engaged in sexual intercourse with girls or boys less than 15 years of age shall be imprisoned from 1 to 5 years and shall be fined from

2,000,000 to 5,000,000 LAK. *Article 133* states that an individual forcing children under 18 years of age into commercial sex work shall be imprisoned from 10-20 years and shall be fined from 20,000,000 to 50,000,000 LAK.

In the Family Law of 2008, *Article 9* stipulates that young people, both male and female, must be over 18 years of age before entering into marital relations, and the Law on Development and Protection of Women (2004), *Article 17* on equality within the family, states that women have freedom to choose their spouse from age 18 onward.

Although there is no law explicitly dealing with corporal punishment, several articles on the Law on Protection of the Rights of the Child (2007) focus on physical and moral abuse, neglect and maltreatment of adolescents.

Article 13 of the Law on Land Traffic (2000) states that "people on motorcycles shall wear standard helmets". In *Article 10*, the legal driving age is identified as 15 and above, with those aged 15-18 limited to motorcycles with engines under 110cc. In the same article, the law limits bicycle use to youth of 12 years and up.

The Law on Tobacco Control (2009), *Article 50*, prohibits persons less than 18 years from smoking, purchasing or selling cigarettes. Several statutes govern the prevention and treatment of other psychoactive substances. *Article 55* of the Law on Narcotic Drugs of (2007) which is part of the Drug Law (2007) assigns the duties and responsibilities of individuals, especially young people to prevent the use of narcotic drugs (i.e. that young people themselves have a responsibility not to use drugs) and to seek treatment if needed.

Article 46 and *47*, of the Law on Protection of Rights of the Child (2007) address prevention and rehabilitation of drug addiction in young people, and provides conditions and facilities for them in terms of treatment, recovery, rehabilitation and education for addiction, as well as vocational training to encourage increased social involvement.

While there were no available doctrines or laws governing minimum age of becoming a novice within the Lao Buddhist religion, the generally accepted minimum age to become a novice is seven years old. However, to join a monastery at this age the novice or nun needs permission from their parents.

In *Article 35* of the Law on the Protection of the Rights and Interests of the Child (2007), MoLSW, is defined as the regulatory body responsible for protection and assistance to children through their Committee for Protection and Assistance to Children. The National Anti-Human Trafficking Committee deals with issues pertaining to human trafficking, working alongside the LWU, the MoH, and the Ministry of Public Security. Designated MoLSW staff additionally work with the *Peuan Mit Centres* to address the needs of disadvantaged, homeless, and orphaned children.

Eight programmes provided by non-government sectors dealt with issues classified as protection, relating to gender, violence, trafficking, age, ethnicity, sex workers, and other marginalised groups.

Only one programme focusing on young people and disability was identified, based on improving access to education for children with disabilities. No programmes dealing with protection issues amongst young people with disabilities were identified. An additional three programmes focused on reducing risks associated with road accidents and UXO, and thus may be considered as disability prevention.

UNODC works with the United Nations Inter-Agency Program (UNIAP) on building the capacity of the judiciary in areas of law enforcement, prosecution, and understanding laws against human trafficking. While this work is relevant to young people, young people are not specifically addressed in these programmes. Nonetheless, it is recognized that the current socioeconomic system and lack of employment opportunities drives human trafficking, particularly among young people. Both young men and women are affected by trafficking, although the focus on women is often greater due to the risks of sexual exploitation. ILO's project on the Tripartite Action to Protect Migrants within and from the Greater Mekong Sub-region from

Labour Exploitation has a focus on strengthening the formulation and implementation of recruitment and labour protection policies and practices, but there is no specific focus on the needs of young migrants unless they are classified as children.

6.2 Protection Situation

Despite the broadly defined protection of youth under many laws, child protection remains a challenge in Lao PDR due to lack of enforcement of the existing legal frameworks. Many of the issues raised elsewhere in this report are issues of child protection, relating as they do to the protection of young people at risk of or young people who are victims of violence, exploitation, abuse and neglect. Such issues include young people in early marriage, and young people who work or are exploited, including those involved in sex work.

A 2012 Country Gender Assessment also notes the issue of human trafficking, reporting that women and girls who are trafficked often end up in forced prostitution and domestic labour.¹¹⁰ More detailed information relating to the issue of child trafficking was not available for this review.

Alcohol abuse is a problem for both young males and females. Part of the problem is the amount of advertisement and promotion of alcohol, not to mention the cultural attitudes to alcohol use; and it is of particular concern because of the influence that it has on accidents, the use of other drugs and sexual activity. New legislation to limit drinking to those over 18 years of age will be promulgated in 2015, and young people will have to show ID before they can be served alcohol, or enter into bars and nightclubs. Those under 18 are already prohibited from using alcohol, and advertisement is already banned, so it is unclear whether an additional law will have the desired effect.

6.2.1 Violence and Physical Abuse

The Law on Protection of the Rights and Interests of Children (2007) defines physical abuse as beating or torture, and sexual abuse as raped, or are victimization of children through sexual relationships or obscenity. Torture is further defined as any act or omission that physically or morally harms the child, sexual abuse, or incitement of the child to commit a crime or to do something that physically or morally harms the child. Despite laws such as this prohibiting violence, and insults against children, the LSIS found that violent **disciplining of children** is common, with 75.7% of 10-14 year olds having experienced this form of discipline from an adult in their household, and over 40% of adults believing that a child needs to be physically punished.¹¹¹

Teachers punish them; Teachers use a wooden broomstick to beat them; Teachers slap them and twist their ears.
Male (10-14 years), rural

In rural and off road rural settings, parents, teachers, village leaders, the police and district authorities are influential, and are able to convene village meetings and other counselling sessions where unruly young people, or other members of the community may be encouraged to change their ways. In urban settings, authorities are less likely to be able to have

the necessary influence over more worldly-wise young people, and the police, and the threat of prison appear to be more important for discipline.

Discipline in school settings may be harsh, with some urban young people mentioning beatings and other physical punishment by teachers. This was not mentioned in both rural and urban settings.

I don't like the teacher who hits my head with a wooden ruler.
Male (20-24 years), rural

In a 2012 study on violence against women and girls, while many young people acknowledged equality as a right, 60% of young men and women (aged 15-18 years) reported that there was **inequality between**

¹¹⁰ ADB and the World Bank (2012). *Country Gender Assessment for Lao PDR – Reducing Vulnerability and Increasing Opportunity*.

¹¹¹ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.

men and women at the community-level, and prescribed roles and expectations for males and females were frequently identified.¹¹² In particular, women and girls appear to be subjected to highly restrictive gender roles governing work, family, responsibilities, sexual relations, and dress. Of note is the fact that

*Boys like to beat girls.
Female (15-19 years), urban*

young people commonly justified certain instances of violence against women and girls when gender roles and responsibilities were believed to have been transgressed. All respondents reported having witnessed or experienced some form of violence in their community, and 46% reported that they had been threatened or touched in a way that made them uncomfortable at school. The study identified that young people have an interest and willingness to discuss and address issues of violence against women and girls, and greater effort should be made to involve young people in reform and as advocates for change.

Violence towards women by strangers did not receive frequent mention. In urban settings, young females did indicate that they are sometimes afraid of violence or rape, and in one rural setting, an isolated event of rape was described during the FGD.

*They fight when they are drunk,
the person who is injured runs
away, it happens during festival.
Male (20-24 years), rural*

Fighting between young males was frequently highlighted in the FGDs, and usually the result of a combination of alcohol consumption and competition for the attention of young females. In all geographic settings violence was generally associated with festivals and entertainment venues, and although often mentioned, the frequency and severity of these conflicts appear to be within the range of socially accepted behaviour. However, in situations where drug use is involved, the levels of violence seem to be more severe, and move beyond insults and fist fighting to the use of knives and other weapons. Some cases of murder associated with drugs were even mentioned.

*Not safe, there is fighting, shooting,
insulting, youth drug addicts, and
people who do illegal things.
Male (20-24 years), urban*

Domestic violence, whether between husband and wife, or parents and children, was mentioned frequently in all geographic areas. In rural and rural off-road settings scolding, insults, and yelling between parents and children is referred to as "normal", and there was little mention of physical punishments. However, domestic violence between husbands and wives, particularly when alcohol is involved, tends to be more physically violent, although it is again difficult to determine frequency and it seems accepted and unchanging in occurrence.

*We should educate husbands
not to beat wife.
Female (15-19 years), rural*

*Fighting between husband and
wife, husband drunk.
Female (10-14 years), rural*

There was one reported murder of a wife and family by the husband, who was later found dead, either as a result of community retaliation, or suicide. This seems to have been a shocking and entirely unusual event that was described in each of the FGDs and by the parents in the concerned village, suggesting it was unusual and noteworthy.

Family violence is mentioned in association with *yabaa* use where young males beat their parents for refusing to provide money, or other support for their drug habits. Again, this violence seems to be quite shocking to the rural communities where it occurs as in general young people in such settings continue to show respect for their parents and other authorities.

*In our village there is one case where the
husband killed his wife, because there
was a misunderstanding. So the husband
killed the wife, and then the two children.
Happened in November last year.
Female (20-24 years), rural*

¹¹² UN Women Regional Office for Asia and the Pacific (2013). *Perceptions and Attitudes of Young People on Issues Related to Violence Against Women and Girls in Lao PDR: Summary findings.*

6.2.2 Crime

Theft is increasingly common in Lao PDR, in both urban and rural settings. Theft of motorcycles, and illegal entry into houses seeking cash and possessions to sell, tends to be by young people from “other villages”, who rather than steal locally, steal from villages away from their homes. In the most rural off-road areas, theft is more likely to be of rice, or chickens or ducks: stolen by young males to eat. In some cases this appears to be theft of food for survival, and in others more of a youthful solution to the sudden desire for something tasty to eat.

Steal because family is poor, steal chicken, steal pig, open the door and enter, and they take rice, and motorbike.
 Female (20-24 years), rural

Some people take drugs all the time and when they don't have, beat parents.
 Male (20-24 years), urban

As set out in the Law on the Protection and of the Rights and Interests of Children (2007), focus group research confirmed that punishment for crimes is often handled by the village headman, in combination with increasing levels of involvement by government officials as is warranted by the severity of the crime. In rural and rural off-road settings, the involvement of parents, threats and warnings, fines, and “education” on the laws, and presumably on young people’s responsibilities, precede any formal involvement or engagement with the police. In rural settings, young females (age 10-14 years) appear frustrated that repeated thefts and even drug offences by young males are not more stringently punished, and that payment made to the police allow the offenders to continue to perpetrate their crimes. There are references in all settings to the settlement of criminal acts by the payment of fines, or other cash exchanges with police. Based on the comments from respondents, these methods do not appear to be particularly effective deterrents.

6.2.3 Exploitation

Some will work as workers for fruit harvest, some will become sex workers then send money back to parents.
 Parents, urban

Sex work was not mentioned as potential sources of income for the male youth interviewed. However, it was raised by the female youth interviewees who also discussed becoming a mistress, or “*mia noy*” as a means of economic gain. Parents, village leaders and Ministry officials also mentioned this as being a concerning trend for young females.

Sex work in the country takes a variety of forms. University students, or young females aged 15-19 years may use transactional sex to supplement their living costs, pay for things like new phones and new clothes, and in some cases pay for drugs. Other young women may become a mistress “*mia noy*” of someone older, who supports them financially in exchange for a sexual relationship. Still others may be trafficked, or otherwise travel to neighbouring countries to work in the sex trade there. This is clearly an extremely dangerous outcome.

Child labour, particularly for families who are poor, is common in Lao PDR, despite its illegality. The primary data collection shows that rural and off-road rural children are often working, tending animals and working in the family fields from ages as young as 10 years.

Age 12-13 must work hard. It's not good for them, but they must do because their parents are poor.
 Female (20-24 years), rural

Young children carry bricks and cement powder for construction; Not good for children to do construction, still young, don't want to study.
 Male (10-14 years), rural

They may also work on construction sites from this young age. It does not appear that work in factories is commonly available to young people under 14 years of age. Because working children are usually unable to continue to attend school, the risk is high that they will be unable to obtain higher paying work as they grow older and will be relegated to labourers for their adult life.

Migrant labour places youth at risk for exploitation. Please see *section 8.3 Migration* for details.

6.3 Barriers to Protection

Lack of education, awareness and enforcement of the laws protecting young people is the primary barrier to their protection. Stakeholders in focus groups agreed that young people lack of awareness of the laws that both govern and protect them. Without a clear understanding of the law, and of their rights, young people are unlikely to follow traffic regulations, and are left vulnerable to the influence of drug dealers, traffickers and other people who can exploit them. At the same time it is clearly important not only to have policies and laws that protect young people, but to ensure that duty bearers are aware of these laws and that they are implemented and enforced.

Have to call to invite parents, advise training, how serious the problem is, fine them, based on the rule...Parents try to teach them, but they don't listen.
Village Authorities, urban

Because technology, youth watch TV, play with their mobile phone, When they see thing they want to test, try to follow.
Village Authorities, urban

Due to low expectations for their career potentials, rural and off road rural youth continue the **cycle of poverty** in Lao PDR, and continue their vulnerability. Focus groups with district authorities, village leaders and parents mentioned that young people are negatively influenced by their exposure through popular music and television to the external influence of Thai and Korean cultural icons that they feel lead Lao youth to experiment and explore aspects of behaviour not accepted in Lao PDR. They believe this creates friction between young people and other groups within Lao society.

Lack of programmes supporting positive interaction for young people through sports, music, dance etc. limit the opportunities young people have for self-expression, and healthy exchanges with others and possibly reinforce risk-taking and other forms of more dangerous entertainment.

6.4 Conclusions

1. There are many protection issues that increase young people's vulnerability and undermine their rights to health, education and development, that require additional attention: early marriage, ethnicity, gender, exposure to domestic violence, including harsh discipline (at home and at school), migration/trafficking of young people, child labour, UXOs, high levels of substance use in the adult population and drug trafficking and inadequate implementation of protective policies and legislation (including against alcohol and tobacco; access to entertainment facilities).
2. Sex work, particularly casual sex work by students exposes young people to significant risk.
3. Vulnerable groups of young people require explicit attention, including young people living with disabilities, LGBT youth, young people working in hazardous and exploitative conditions, including all migrant workers and female young people who are vulnerable to the risk of encountering violence and rape.
4. Wider dissemination and stronger monitoring of existing policies and legislation that protect, respect and fulfill young people's rights should be considered, including concrete follow-up to the recommendations of the Committee on the Rights of the Child.
5. Crime in Lao PDR, particular perpetrated by young offenders, appears to be increasing. Due to limited public awareness of existing laws, and inconsistent enforcement by authorities, the protection of youth who commit crimes, and those who are victims is at risk.
6. Additionally, strengthening interventions and programmes that target key duty bearers, including parents, teachers, service providers, employers, village authorities and the police, will make an important contribution to the protection of young people's rights.



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7

VII Participation

The intended meaning of participation was both the inclusion of youth in decision-making, and their recognition as contributing members of society. The later definition was most clearly understood by the young people who were interviewed for this study, who interpreted the meaning of participation “karn mee suan houme” as their voluntary contributions to work around their village.

7.1 Participation-related policies and programmes for young people

The rights of children under age 18 to participation is expressly identified in the Law on the Protection of the Rights and Interests of Children (2007). *Article 7*, Participation of Children states that “the State, society and family shall create conditions for children to participate in various activities and to express their views in all matters affecting them”. *Article 6* protects children from discrimination based on “gender, race, ethnicity, language, beliefs, religion, physical state and socio-economic status of their family”.

The rights of young people to be eligible for voting at age 18 and to stand as candidates for political positions at age 21 are protected in *Article 6* of the Election Law (2010). All young males are eligible for conscription when they reach the age of 18 years, under the Law on National Defence and Security (1995), *Article 3*.

The Lao People’s Revolutionary Youth Union Law (2009) governs the work of the Union guided by the Lao Government, with funding from the government and international organisations, and is aligned to Lao People’s Revolutionary Party objectives. The predominant role of the LYU is awareness raising around key social and health problems pertinent to youth, including migration, education, drug use, traffic law enforcement, cultural protection, and communicable disease. While many young people are not members of the LYU, the organisation actively seeks to engage and mobilize young people. LYU partners with other ministries and organisations, for example the Ministry of Public Work and Transport (MoPWT), UNFPA and Save the Children.

Three programmes specifically targeted youth participation in their communities and civil society: the radio and television programmes offered through Lao Youth Radio with UNICEF, and Save the Children with LYU, and the Disaster Risk Reduction for Children (DREC) project. Because they are delivered through broadcasting facilities, the radio programmes potentially have broad geographical coverage. These programmes aimed both to raise awareness and also to promote youth participation in civil society. The DREC project is currently limited to 3 provinces, and has been approved for integration into the national curriculum.

In addition to these programmes, 23 (70%) of them specified that young people were involved in the programme design, planning, implementation, or monitoring and evaluation. However, it is likely that these varied in terms of the meaningfulness of the participation. Of those with any participation, 10 (43%) used a peer education model, 15 (65%) indicated young people’s involvement in programme implementation, 9 (39%) in the planning or design, and 7 (30%) in monitoring or evaluation.

7.2 Participation Situation

No data was available on the level of participation by young people in decisions affecting them. This is an area of opportunity for additional research.

The focus group research revealed that the concept of participation may be difficult to grasp for young people. The original design of the questions dealing with participation was to identify areas where young

people were involved in village or community decision-making. Young people interpreted this question in terms of their engagement with village life, and their efforts to work in solidarity “sama khi” with the other members of the village. As a result, they identified many things they do to help in the village, at the temple and in the process of building houses, planting fields, and providing support during weddings, funerals and festivals. In Lao PDR, there are many festivals with specific roles for young people such as carrying the boats for the boat festival, and preparing and serving food. Particularly in the rural and off-road rural settings, and in Luangprabang these festivals are focal points for the Buddhist year, and there are high levels of engagement and activity by young people.

There was no evidence that participation in decision-making by young people occurs in any forum in any region. Where LYU representatives were present in the village, young people noted that they were frequently not young (in some cases in their 40’s) and were not representing young people’s perspectives.

Village headman is the person who decides Secretary of youth doesn't dare to decide.

Male (20-24 years), urban

It is common in both urban and rural settings for young people to be called to assist in cutting grass, cleaning the roadways, building walls at temples, and working together as a community to beautify and care for their village. The more rural the environment, the more this working for the community seems to signify young people’s commitment to their village and their country. Only in these rural settings do

We assist each other, we help them, they help us.

Female (15-19 years), rural

they refer to solidarity and their engagement with the community as a show of strength, caring and concern for each other. In urban settings, there is less involvement of young people, and it is mostly young females who participate in welcoming people to weddings, with young males setting things up for parties and events, and serving their friends and families at festivals and private gatherings.

Gender differences in terms of participation were seen most clearly in roles requiring heavy lifting, killing of animals or “viek nuck” (hard work) which were the sole responsibility of males. Girls were more frequently involved in food preparation. In urban settings, there was no mention of the community solidarity and sense of commitment that was seen in the rural and rural off-road rural settings.

Want to have a secondary school; Want everyone to have water and electricity.

Female (10-14 years), rural

Young people are aware that opportunities to change levels of participation are occurring. In rural settings, their desires represent the level of need within their community, and focus on basic needs for clean water, electricity, and education, whereas in urban

Want equal rights, avoid discrimination between ethnic groups, and poor people.

Female (15-19 years), urban

settings, where more of these basic needs are met, the desire for greater equity was voiced.

7.3 Barriers to Participation

Participation by young people can be limited by their lack of finances to continue in education and be included in the decision-making layers of Lao society. In rural settings, the concept of participation by youth was limited to shared community labour, and volunteer support at festivals. Rural youth may be limited by the perceptions of parents and leaders.

District level should come to educate our youth to make them strong.

Parents, rural

Without representation from organisations like LYU, there is really no “seat at the table” for young people in Lao PDR. In many cases, young people have limited aspiration or desire to be decision-makers, particularly in rural settings where the role of authority is significant and few can participate at that level. In the case where there is a representative for youth, they do show frustration when that representative is too

Give opportunity for the high level to come to the village to see activities to show their capability, some have capability but there is no opportunity to show.

Male (20-24 years), urban

old to represent their needs. Even a lack of electricity can influence young people's ability to participate in community events: without it, they may not know that events are occurring or have any information on how they can be involved. In urban settings, there is more desire for engagement.

Attitude of those responsible for engaging with youth may be a barrier as well. Ministry leaders identify young people's main challenges as stemming from their inability to be critical thinkers, and their lack of motivation and discipline. Differences between adults' and young people's perspective on young people's behaviours is not entirely unexpected. There is, however, significant concern amongst ministries and other adult stakeholders that the shifting attitudes of young women towards their traditional clothing, and traditional ways of wearing their hair are the result of negative external influences, including television advertising.

Finding an acceptable way forward across the continuum from the remote rural off-road youth to the more globally aware urban youth in Vientiane Capital will be an important part of future participation strategies for youth. Balancing the existing and past social values and norms valued by adults with the hopes of young people for new and better opportunities for health, education, employment, protection and participation in a uniquely Lao context will be essential to those strategies being accepted and implemented.

7.4 Conclusions

1. Young people are participating in many ways in their villages in terms of contributing to festivities and maintaining the environment, and youth, as well as parents and village authorities value these acts of solidarity within their communities.
2. Young people rarely have the opportunity to contribute to decisions that are taken about their lives, at any level. In rural settings, there may be no representative for youth in the village, and few opportunities for engagement. Another reason is that particularly in rural settings the role of authority is significant and few can participate at that level. For urban youth, there appears to be more desire for contribution, but limited settings where it is possible, particularly for those whose education level is low. It is also likely that young people are limited not only by their own expectations but also by the perceptions of parents and leaders. Without representation from organisations like LYU, there is really no "seat at the table" for young people in Lao PDR.



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VIII Cross Cutting Issues

The five pillars of health, education, employment, protection and participation form a convenient framework for reporting on young people, however a discussion of the interrelationships and dependencies between these pillars is essential to understanding the complete situation of young people in Lao PDR.

8.1 Alcohol and Drug Abuse

Impacting health, education, employment, protection and participation, the role of alcohol in Lao society is a cross-cutting issue. Throughout the primary research, alcohol's relationship to violence amongst youth and between youth and their parents was identified, along with the role of drug abuse in school drop-out. Risk-taking behaviour, leading to malaria, road traffic accidents, and also unwanted pregnancy and abortion was linked to alcohol consumption.

Drug abuse, mainly an issue for young men also crossed from health to school drop-out, to risk-taking behaviours influencing protection.

There were some obvious and expected differences in perspective between adults and young people in relation to changes in young people's behaviours in relation to existing and past social values and norms, with adults hoping for a return to the past and young people opting for the future. This varied to some extent across the urban, rural, off-road rural continuum.

KIIs with parents, village leaders, district authorities, monks, and the owners of entertainment venues were carried out to understand their perspectives on the situation of young people. Their opinions are consistent in identifying concerns about alcohol and drug use by young people, and point to a lack of job prospects and poor access to education as possible contributors to drug use and crime. Clearly there is no firm start or end to the interplay between these formative issues.

Ministries concur with parents and other authorities on the main issues for youth, including drug use by male youth, early and unwanted pregnancy, sex work and abortion for females, and lack of employment for both males and females.

8.2 Early Pregnancy

As noted in detail in the health section, early pregnancy is not uncommon in Lao PDR both within and outside of marriage. This reflects cultural norms which are slowly changing as young women have greater access to education (both on their sexual and reproductive health, and in general) and the employment opportunities that result from improved education. Early pregnancy is not only an issue for the health of the young mother and her child, but locks them both into the cycle of poverty associated with low levels of maternal education, due to school drop-out, and limited employment options.

8.3 Migration

Migration is a cross-cutting issue influenced by employment opportunities with an impact on health and protection and to a lesser extent education and participation. Driven by lack of employment, which in turn can be due to a lack of education, the lure of distant opportunities may open youth to the potential for human trafficking, health risks, and protection issues both within the country, and in neighbouring and distant nations. Although human trafficking is an extreme form of migration, many of the opportunities for young people border on, or frankly are trafficking. Trafficking affects both young men and young women,

females receive greater focus because of the risk of sexual exploitation. There is a lack of awareness that young men are also vulnerable to exploitation through poor working conditions, and illegal immigration, which places them in dangerous situations in Lao PDR and in neighbouring countries. More detail on migration can be found in the employment section.

8.4 Gender

Even without giving birth at a young age, lack of secondary school completion for young women from ethnic and poorer socio-economic families traps Lao PDR in the poverty cycle. Gender influences in employment and participation are easily perpetuated when education levels are low. Focusing on the benefits of improved health and education for the young women who will soon become mothers is the single most important way for Lao PDR to end stunting caused by poor nutrition, and poor infant feeding practices, (described in the section on health) and critical to building a strong, healthy educated workforce, ready to meet the demands that ASEAN membership will bring.¹¹³

8.5 Communication with Young People

Access to information about their country, to information about their bodies, and to information about the rest of the world is a cross-cutting issue in Lao PDR.

According to the LSIS report, the majority of 20-24 year olds in Lao PDR (80.1%) watch television at least once a week.¹¹⁴ This makes television the medium most accessed by youth; less than half reported listening to the radio and less than one in five read a newspaper. In a number of studies, mass media, specifically television, were cited by youth as an important source of information about reproductive health.¹¹⁵

LSIS also reports that only 10% of youth have ever used the Internet.¹¹⁶ This indicates that Internet based forms of communication are not yet appropriate for reaching large numbers of youth in Lao PDR. However, Internet use does increase steadily in correlation with both education and wealth levels so may be important for reaching early adopters. No data were found specifically relating to levels of mobile phone access and use by young people, although overall use in the country is increasing rapidly and many of the users are likely to be young people, particularly in urban areas.

In FGDs the lack of access to information was evident in the perceptions of youth in urban vs rural vs rural off-road settings. Lack of common language, lack of access to electricity, and limited ability to afford the technology supports the educational and knowledge divide that exists between urban and rural youth.

¹¹³ Transgender youth were not included in any of the focus groups and as such are not identified specifically in future gender-based analysis.

¹¹⁴ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.

¹¹⁵ For example: i) Assessment of Condom Programming in Lao PDR. MoH and UNFPA, 2008; ii) Young Women's Sexual Behaviour Study, Vientiane Capital, Lao PDR. PCCA, Burnet Institute and UNFPA, 2008.

¹¹⁶ MoH and Lao Statistics Bureau (2012). *Lao Social Indicator Survey*.



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IX Conclusions

1. As a nation, Lao PDR has a **young population**. As the cohort of young people moves up the population pyramid, their health, education, skills and overall development are likely to have **profound implications for the present and the future**, for this generation and the next.
2. The rapid pace of change in Lao PDR is dependent on the youth of today being able to make a **successful transition to adulthood** and assume their role in guiding the country on a path of continued positive development. Now is a critical time for Lao PDR to pay adequate attention to young people's health, education, skills and opportunities for decent work, protection from exploitation and abuse, and space to participate in decisions that affect their lives. There is a broad consensus that **directing more resources to meeting the needs and fulfilling the rights of young people** will be central to public health, a skilled and literate population, decreasing poverty, increasing gender equity, and ensuring social and economic development to **build a strong future for the country**.
3. While some segments of youth in Lao PDR enjoy good health, education and employment opportunities, and have access to safe and appropriate recreation, there are **significant disparities** in access to educational and health services based on rural location, ethnicity, gender and family income. This report highlights the **heterogeneity among young people** because diverse external factors and vulnerable groups require explicit consideration in the development of policies and programmes.
4. Programme development for youth cannot be seen outside the development of policies and strategies that apply to the general population, but the **specific needs, requirements and rights of young people** within those policies should be clearly identified and met. The existing programme landscape is limited in its ability to be sustained without external funding, and in the quality of the **monitoring and evaluation data available to assess its effectiveness**.
5. Policies and legislation should support not only interventions meeting the needs of youth, but also **support duty bearers** (e.g. service providers, parents, teachers) to strength their capacity to meet those needs, and to monitor progress in achieving youth goals. While Lao PDR has many excellent policies and legislation in place, the **limited enforcement of these laws and policies**, and **lack of public awareness of their contents** limits their effectiveness in protecting the rights of youth.
6. Most secondary **data available in Lao PDR focusses on selected subsets of the population** into which youth may fall. The **data is not representative of a broad cross-section of youth** with sufficient detail to assess the relative magnitude of issues facing youth, and the distribution of circumstances that affect them.
7. There is strong linkage between health, education, employment, protection and participation in determining the future of youth. While young people are included in some of the sectoral strategies, sometimes more implicitly than explicitly, there is **no overall strategy for young people** in the country. Sectors involved need to **work collaboratively across these pillars** to ensure that a comprehensive national strategy for youth is sensitive to their interdependent relationships in youth development and makes best use of the available resources by combining the contributions of a range of partners, government and other interested parties.
8. While much of the AYSA focuses on young people's problems, this should not in any way detract from the evidence that many young people are healthy, they are going to school, finding time for leisure activities and contributing to their families and communities - they are **potent source for good in the country** with many assets. The current period where many changes taking place in Lao PDR can both benefit and undermine young people's health and development. By **investing in young people** as drivers of positive change, by addressing the opportunities and challenges facing young people there will be a **unique opportunity to transform the social and economic landscape of the country**.



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10

X Implications for action

People under age 25 make up 60% of Lao PDR's population. The challenges faces by this segment of the population have a direct impact on Lao PDR's future success. Investing in youth will be transformative.

This section of the report identifies potential for future strategies that may aid this transformation without assigning specific responsibilities to either government departments or development partners.

1. **Cross sector collaboration is essential to developing an effective national strategy for youth.**

- Ministry of Health, Ministry of Labour, Ministry of Education and Sport and mass organisations, such as the LYU and the LWU, along with development partners need to work together to ensure that young people are ready to meet the challenges of ASEAN standards by 2015.

2. **Quality data is needed as an evidence base for informed policy-making.**

- Including age as a key and prominent variable in data pertaining to programmes and issues in Lao PDR is essential to assessing youth impact.
- Data must be disseminated broadly in both English and Lao and publicly available to interested parties.
- Future quantitative research in Lao PDR should be national in scope, and have sufficiently robust design to explore geographic, ethnic, gender, educational, socio-economic, marital and disability status detail to better inform public policy and assess the relative prevalence of vulnerable groups. It should address the data gaps in the area of abortion, migration, protection and participation.
- Substantial additional value exists within the raw data collected for this report. Consideration could be given to allowing access to this data to other agencies interested in further research on youth in Lao PDR.

3. **Work to reduce disparities in access to health services by youth.**

- Gender, ethnicity, poverty, geographic location, and other vulnerabilities such as disabilities, and residence status (migrant workers) and marital status influence access to health services.
- Support the national health system to increase sensitivity to the needs of adolescents and young people through training and improved service provision for family planning and other health services regardless of marital status, economic status and ethnicity.
- Develop social behaviour change communication strategies (BCC) to address the challenge of risk taking behaviours especially among the most vulnerable young people.

4. **Work to reduce disparities in access to safe, quality education including both primary and secondary education, SRH-education, life skills, and vocational training as well as career planning, to ensure that young people have access to education and training that aligns with the available job opportunities.**

- Consider the opportunities and abilities of Lao young people in the context of the broader ASEAN community to ensure they are competitive within the region.
- Provide support for long term programmes for education and skills-based training for poverty alleviation in rural communities.
- Enforce laws prohibiting child labour and early marriage.

- Equip all schools with adequate sanitation facilities.
 - Consider rural teaching rotations as part of teacher training.
 - Increase information on available employment opportunities through notice boards, electronic communication, including text messaging.
 - Ensure employment protection for Lao youth through employment policies and regulations that provide access to job-based training, and incentives for employing vulnerable populations.
- 5. Invest in expanding the opportunities for youth to be heard, and to participate in shaping the future of Lao PDR.**
- Including less advantaged young people who are most at risk of not having their voices heard.
 - Engage with LYU to ensure youth have visible representation in government forums to actively participate in the decision-making processes.
 - Use youth as both champions and as agents for their own change, by actively involving them in identifying and protecting their needs, and in creating multiple forums for youth expression including civil society organisations and youth groups serving sub-sets of youth.
- 6. Ensure that duty bearers have improved capacity to guide youth development and ensure their protection.**
- Improve their knowledge of existing legislation and their ability to communicate and enforce it.
 - Build the capacity of the judiciary in protecting vulnerable youth, particularly as it relates to laws against human trafficking and Gender-based violence (GBV).
 - Ensure multi-sectoral interventions to address GBV including women and girls, men and boys.
- 7. Monitor and evaluate the impact of actions taken to support youth through regular discourse and dialogue with youth.**
- Invest in developing open channels of communication for the assessment of youth attitudes, evolving needs, and accomplishments.
 - Ensure all programmes implementing services for youth routinely evaluate their quality, and effectiveness in meeting their goals and objectives.
 - Communicate the results to youth, as well as to agencies directly involved in their welfare.

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11.2 Literature Reference

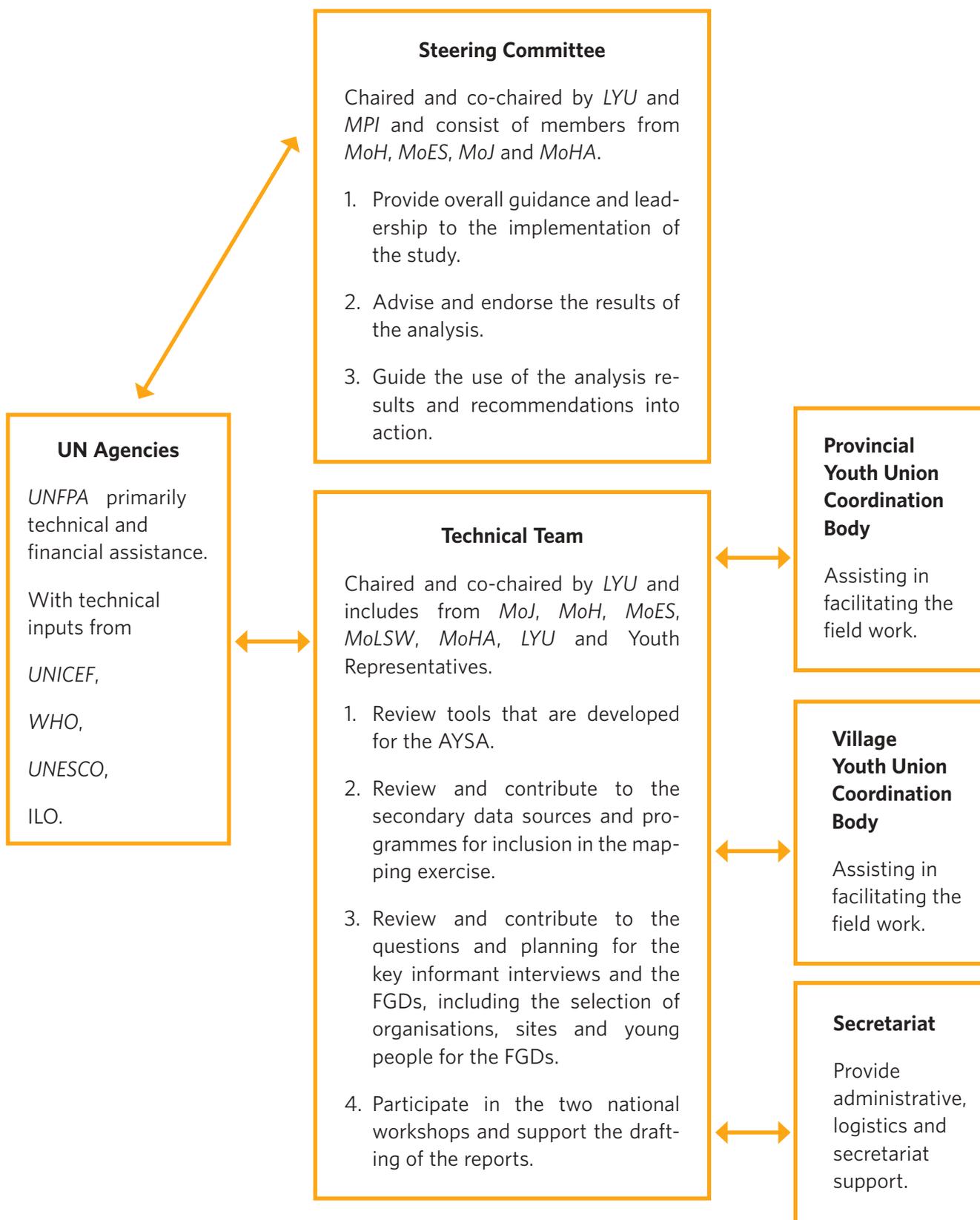
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XII Annex

Annex 1: Structure of Steering Committee and Technical Working Group for the Adolescents and Youth Situation Analysis (AYSA).



Annex 2: List of Personnel Involved in the AYSA

AYSA Steering Committee

- Dr. Khampha Phimmasone, Deputy Secretary General, LYU
- Mr. Alounxai Sounnalath, Member of Secretariat Committee, Permanent Secretary, Director of Cabinet Office, LYU
- Mr. Syviengxay Oraboune, Deputy Director General, NERI, MPI Associate Professor
- Assoc. Prof. Dr. Sing Menorath, General Director, Department of Training and Research, MoH
- Mr. Kadam Vongdeuane, Deputy Director of Education and Sports Research Center, MoES
- Mr. Leephao Yang, Director General of Planning and Cooperation Department, MoLSW
- Mr. Phomma Keoboupha, Head of Home Affairs Department of Saysomboun Province, MoHA
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Mr. Vichit Keosavath, Youth Secretary, Nambark District
Mr. Bounlieng Keomany, Youth Secretary, Luangprabang District

Attapeu Province

Mr. Keovongvieng Bousavong, Provincial Secretary
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Mr. Vernphet Keovongphone, Youth Secretary, Sanamxay District

Mr. Souvanxap Phetdala, District Standing Party Committee member overseeing mass organisation, Xanxay District

Mr. Phoukieo Pengphavanh, Deputy Youth Secretary, Xanxay District

Savanakhet Province

Mr. Vanhkham Inthichack, Standing Party Committee member, President of Provincial Front Construction, Member of the Committee overseeing mass organisations.

Mr. Singvinglay Keophonevilay, Deputy Director, Administrative Office, Provincial LYU

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Mr. Khamla, Kengthakami Village Youth Committee member, Sepone District

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Ms. Pafoualee Leechuefoung, Assistant Representative, UNFPA Lao PDR
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Ms. Rebecca Brown, former Young Key Affected Populations Support Officer, UNESCO Bangkok

ILO

Ms. Khemphone Phaokhamkeo, ILO National Coordinator, ILO Lao PDR

Annex 3: Basic Statistics about Young People in Lao PDR

1. Summary General Statistics¹¹⁷

Area	236 800 sq. km ^a
Population, 2005	5 645 950 (Population Census, 2005)
Population, 2013 est.	6 580 800 (Population Census, 2005)
Rural-Urban population, 2005	68.0% - 32.0% ^c
Crude birth rate, 2007	33.2 per thousand ^c
Crude death rate, 2007	9.1 per thousand ^c
Annual population growth rate, 2007	2.4% ^c
Human Development Index (HDI), 2010	0.497 (122 of 169) ^d
Average annual growth rate of GDP per person employed, 2010	5.9% (MDG Report, 2013)
Poverty gap ratio (% of poverty line), 2007/08	6.5% (LECS 2007/08)
Population below the national income poverty line, 2007/08	27.6% (LECS 2007/08)

2. Total Youth Population by age 2005

Sex	10-14	15-19	20-24	Total
Male	391,810	323,750	253,941	969,501
Female	375,437	323,598	261,416	960,451

¹¹⁷ a. Lao Reproductive Health Survey 2005. Vientiane Capital, the Lao People's Democratic Republic: Committee for Planning and Investment, National Statistics Centre. Supported by the United Nations Population Fund, 2007.

b. World Health Statistics 2011. World Health Organisation, 2011. [Cited 24 May 2011.].

c. The Lao People's Democratic Republic Country Context. World Health Organisation Regional Office for the Western Pacific. [Cited 24 May 2011.] Available from: <http://www.wpro.who.int/NR/rdonlyres/076BC0B0-9414-493C-A62D-30DDBE0B3B8A/O/17finalLAOpro2010.pdf>.

d. Human Development Report 2010. Table 2: Human Development Index Trends, 1980-2010. United Nations Development Programme. [Cited 6 November 2010.] Available from: http://hdr.undp.org/en/media/HDR_2010_EN_Table2.pdf.

3. Estimated Geographical Distribution of Youth Population 2005 and 2013

Geographic location	2005					
	Age group					
	14-10		15-19		20-24	
	Male	Female	Male	Female	Male	Female
Province						
Vientiane Capital	37,270	36,283	43,436	48,193	47,581	48,365
Phongsaly	11,975	11,340	9,039	8,844	6,403	6,243
Luangnamtha	9,836	9,305	8,617	8,566	6,296	6,664
Oudomxay	19,027	18,347	15,091	15,410	10,700	10,993
Bokeo	9,489	9,222	8,024	8,246	5,921	6,431
Luangprabang	30,020	28,112	23,939	23,930	17,824	17,993
Huaphanh	22,215	20,937	15,246	14,087	10,361	10,167
Xayabury	24,102	22,981	20,460	20,212	15,309	15,743
Xiengkhouang	19,685	18,583	14,850	14,379	9,428	9,530
Vientiane Province	28,858	27,639	26,115	24,386	20,280	19,670
Bolikham	16,784	15,751	12,911	12,369	9,839	9,761
Khammouan		23,434	18,015	18,286	13,014	14,539
Savannakhet	58,344	56,435	46,955	46,396	36,293	37,809
Saravanh	23,838	22,814	17,081	17,051	11,166	12,770
Xekong	5,557	5,469	4,320	4,490	3,136	3,556
Champasack	43,159	41,483	34,099	32,602	26,309	26,503
Attapeu	7,616	7,302	5,552	6,151	4,081	4,679
Total	391,810	375,437	323,750	323,598	253,941	261,416

Residence	2005					
	Age group					
	14-10		15-19		20-24	
	Male	Female	Male	Female	Male	Female
Urban	95,769	92,542	101,383	101,494	91,079	89,698
Rural	211,053	201,686	163,102	159,898	118,767	124,088
Rural without road	84,891	81,089	58,860	61,903	42,765	46,998

Geographic location	2013 (estimated)					
	Age group					
	14-10		15-19		20-24	
	Male	Female	Male	Female	Male	Female
Province						
Vientiane Capital	29,893	28,216	33,830	32,214	39,217	40,825
Phongsaly	11,340	10,947	11,690	11,097	9,352	8,911
Luangnamtha	9,375	9,318	9,948	9,539	9,236	8,865
Oudomxay	19,334	19,297	19,430	18,941	16,249	15,941
Bokeo	9,805	9,658	9,759	9,534	8,881	8,796
Luangprabang	26,914	26,719	27,672	26,530	25,165	23,927
Huaphanh	21,147	20,894	22,091	21,185	18,070	16,798
Xayabury	18,651	18,141	21,437	20,610	22,323	21,509
Xiengkhouang	16,943	16,503	18,425	17,611	16,877	15,989
Vientiane Province	25,487	25,019	27,684	26,985	28,820	27,364
Bolikhamb	15,747	15,311	16,819	16,018	15,728	14,877
Khammouan	22,876	23,008	23,550	23,380	20,655	20,277
Savannakhet	52,335	52,467	56,461	55,075	50,794	49,347
Saravanh	23,684	23,728	24,150	23,474	20,559	19,806
Xekong	6,868	6,766	6,009	5,870	4,942	4,940
Champasack	38,456	37,851	40,509	39,118	37,126	35,506
Attapeu	8,505	8,210	8,069	7,798	6,669	6,696
Total	357,360	352,053	377,533	364,979	350,663	340,374

4. Youth Marital Status

	Male				Female			
	Marital Status				Marital Status			
	Never Married	Married	Divorce/ Separated	Widowed	Never married	Married	Divorce/ Separated	Widowed
15-19	92.8	5.6	0.0	0.0	79.6	18.6	0.9	0.1
20-24	62.0	35.9	0.2	0.1	37.7	58.5	3.0	0.4

5. Population of Young People Lao PDR by Ethnicity

Ethnicity	Age group (Persons)							
	10 - 14		15 - 19		20 - 24		Total	
	Male	Female	Male	Female	Male	Female	Male	Female
Lao	209,442	201,838	184,802	184,081	151,799	156,558	546,043	542,477
Tai	17,132	16,229	12,718	12,082	9,321	9,213	39,171	37,524
phouthay	13,624	13,169	10,894	10,578	8,028	8,588	32,546	32,335
Lue	8,522	8,217	8,015	8,292	6,030	6,198	22,567	22,707
Ngouan	1,950	1,980	1,886	1,871	1,350	1,529	5,186	5,380
Yang	462	423	390	381	297	305	1,149	1,109
Xaek	294	286	192	211	115	157	601	654
Thaineua	1,042	1,032	932	859	605	717	2,579	2,608
Khmou	43,810	41,908	33,451	34,052	25,229	25,112	102,490	101,072
Pray	1,506	1,379	1,010	1,212	631	873	3,147	3,464
Xingmoun	636	583	403	393	343	378	1,382	1,354
Phong	1,772	1,786	1,263	1,389	992	1,041	4,027	4,216
Thaen	43	38	22	31	16	25	81	94
Oedou	51	37	37	29	19	26	107	92
Bid	131	123	113	111	94	82	338	316
Lamed	1,329	1,352	945	1,075	650	755	2,924	3,182
Samtao	225	247	171	206	124	142	520	595
Katang	8,341	7,928	5,686	6,000	4,093	4,575	18,120	18,503
Makong	7,977	7,652	5,506	5,734	3,950	4,464	17,433	17,850
Tri	1,571	1,485	1,063	1,267	871	1,115	3,505	3,867
Yrou	3,308	3,407	2,448	2,527	1,776	2,049	7,532	7,983
Triang	1,831	1,793	1,547	1,511	1,145	1,172	4,523	4,476
Ta-oy	2,238	1,969	1,609	1,574	1,181	1,240	5,028	4,783
Yae	675	644	547	580	451	383	1,673	1,607
Brao	1,430	1,393	1,149	1,185	833	919	3,412	3,497
Katu	1,461	1,393	1,104	1,246	837	959	3,402	3,598
Harak	1,437	1,365	1,018	1,134	791	848	3,246	3,347
Oy	1,548	1,466	1,057	1,210	845	947	3,450	3,623
Griang	813	874	640	630	434	485	1,887	1,989
Cheng	501	470	354	396	284	335	1,139	1,201
Sadang	53	39	50	41	23	30	126	110
Xuay	3,166	3,085	2,190	2,320	1,492	1,769	6,848	7,174
Nhaheun	457	397	315	287	248	271	1,020	955
Lavy	75	72	59	51	51	50	185	173
Pacoh	967	950	769	824	543	645	2,279	2,419
Khmer	381	361	271	326	216	238	868	925
Toum	269	242	209	203	163	173	641	618
Guan	53	53	38	44	33	36	124	133
Moy	44	36	43	25	28	25	115	86

kree	35	24	23	18	16	29	74	71
Akha	6,611	5,954	5,016	4,659	3,909	3,708	15,536	14,321
Singsily	2,570	2,626	2,191	2,217	1,392	1,402	6,153	6,245
Lahu	849	709	690	737	498	629	2,037	2,075
Sila	221	183	170	137	94	111	485	431
Hanyi	69	60	65	57	36	31	170	148
Lolo	137	124	115	117	74	65	326	306
Hor	727	715	619	552	441	432	1,787	1,699
Hmong	34,460	32,154	25,479	24,870	17,917	17,200	77,856	74,224
Iewmien	1,957	1,848	1,495	1,430	1,207	1,185	4,659	4,463
Other	831	788	790	654	644	540	2,265	1,982
No answer	2,751	2,485	2,160	2,124	1,767	1,612	6,678	6,221
Total	391,785	375,371	323,729	323,540	253,926	261,371	969,440	960,282

6. Lao PDR Population Estimates Lao PDR

Figure 1: Age and sex distribution of household population, Lao PDR 2011-2012 (LSIS 2011-2012)

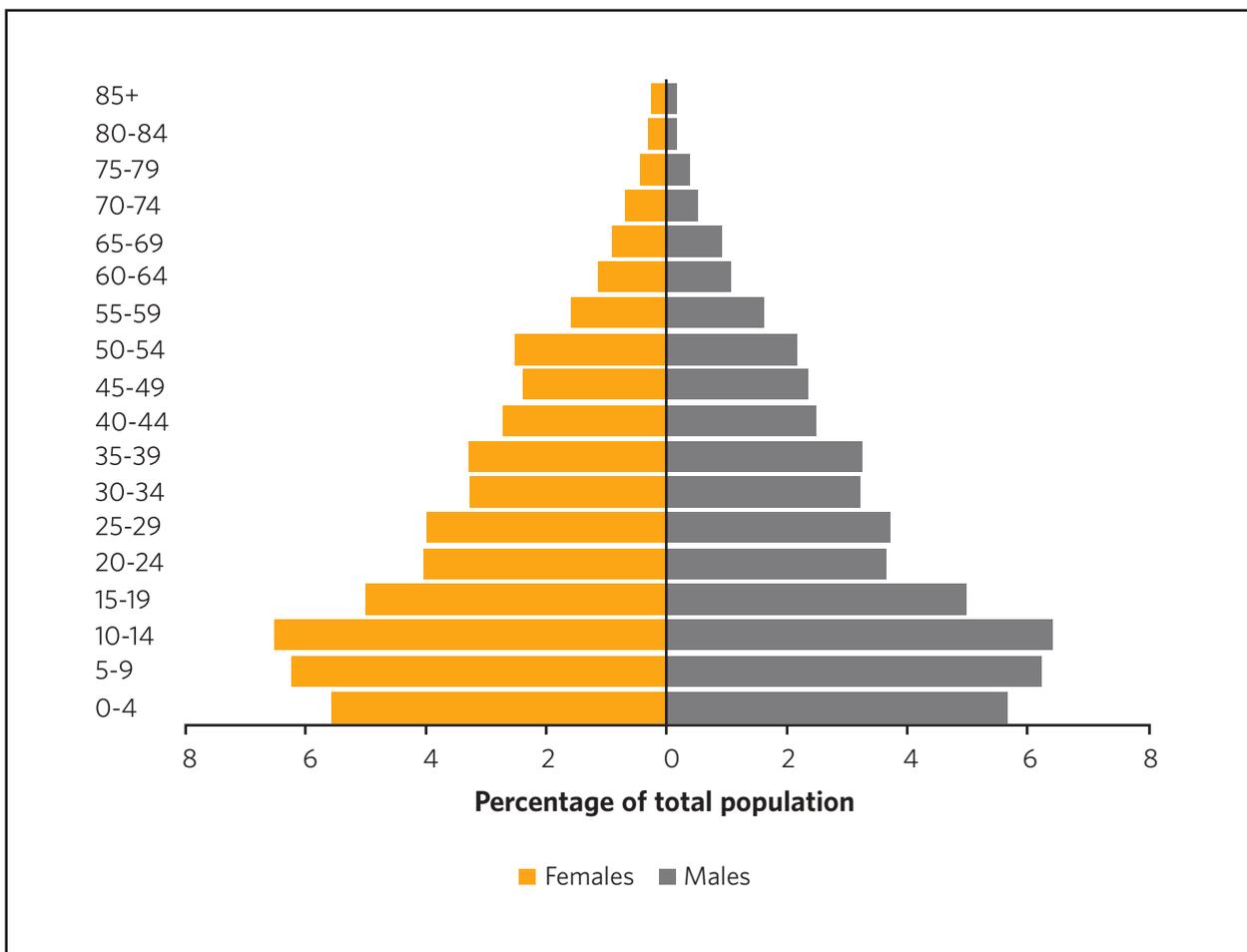


Figure 2: Population Structure of Lao PDR

Projected Total Population by 5-Year Age Group and by Sex Under 3 Assumptions: 2010-2050

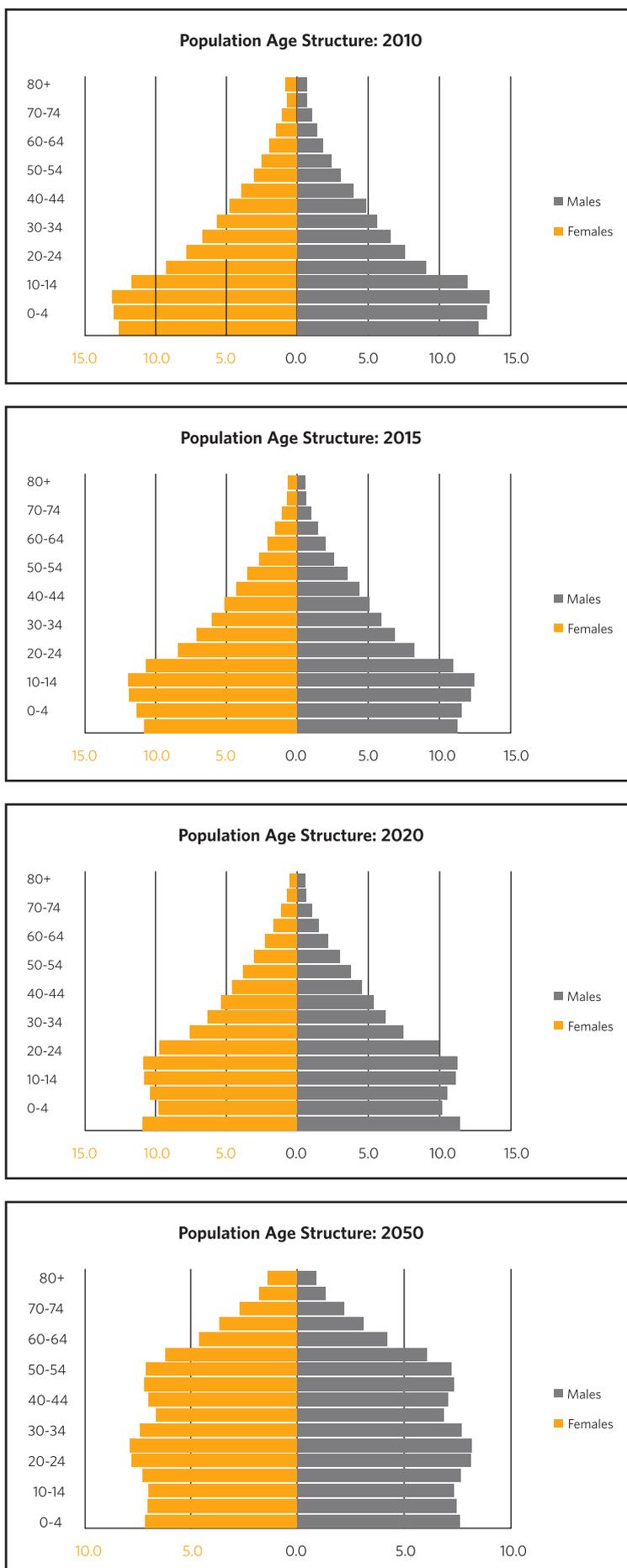


Figure 3: Secondary school attendance ratio (adjusted) by sex, area of residence, wealth index quintile, mother's education and ethno-linguistic group (LSIS 2011-2012)

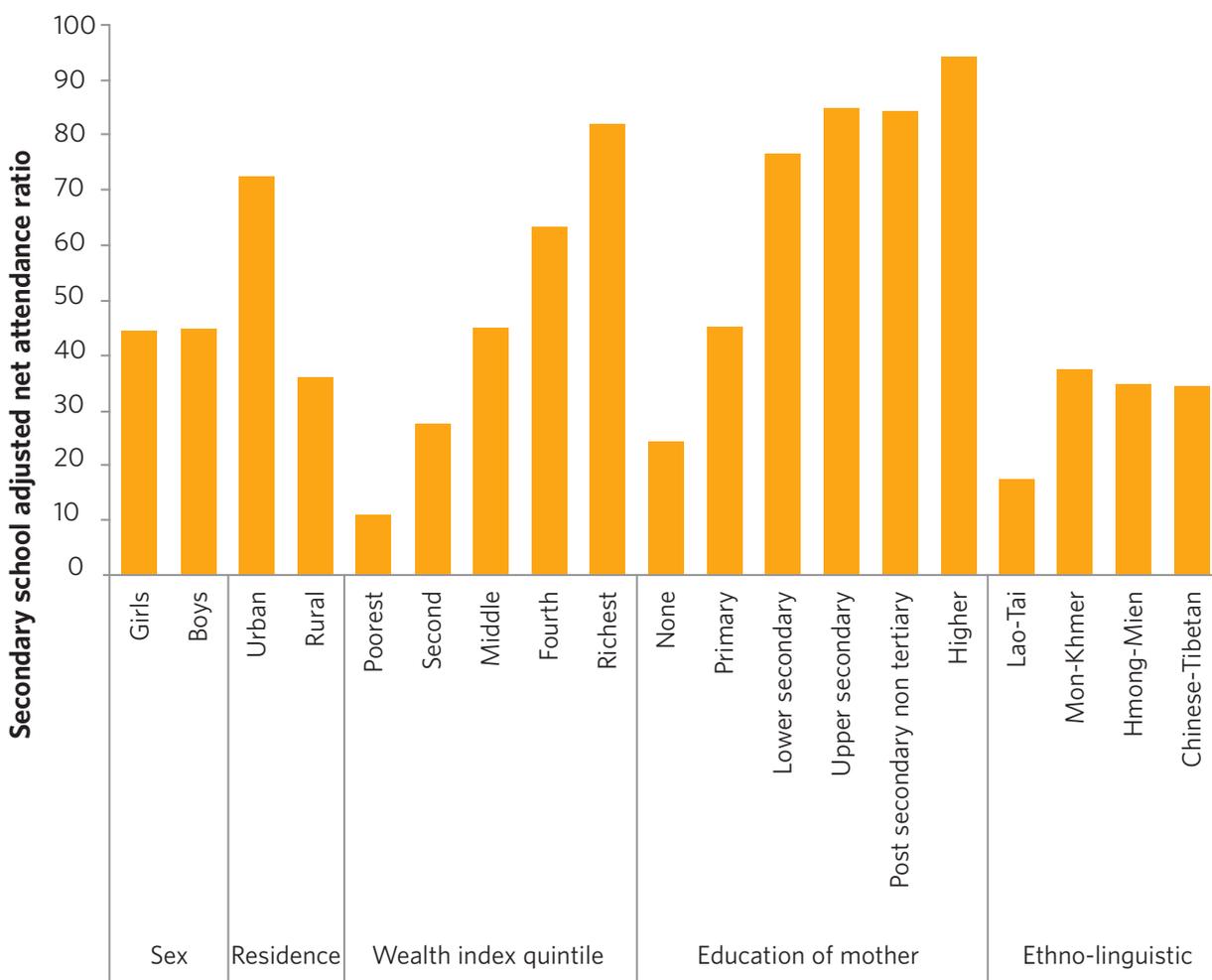


Figure 4: Literacy among young men and women aged 15-24 years by sex, age group, area of residence, wealth index quintile and ethno-linguistic group (LSIS 2011-2012)



7. Matrices and Criteria for Secondary Data Analysis, Policy and Programme Review

Secondary Analysis Matrix

Document Details	Target Group	Content	Objectives	Methods	Limitations	Major Findings	Major Gaps
Title, year, author, organisation	Which young people: age, sex, other characteristics, vulnerable young people?	What issues does the document focus on (health, education, employment, etc.)?	What was the purpose of the study, review, research?	How was the data collected and analysed?	Geographical coverage, limitations identified in the report (e.g. method)	What were the key findings of the review?	What questions are not answered that need further exploration

Criteria

- Must be an assessment, evaluation or research study report;
- Have been published since 2006¹¹⁸;
- Focus on health, education, employment, protection and/or young people's participation;
- Include age-disaggregated data for the 10-24 year old age group (or for a portion of this age group, for example 15-24 year olds);
- Include a focus on the whole country or on specific provinces/population groups.

Data for Policy/Legislation Mapping

Details of Policy/Legislation	Main content of the Policy/Legislation	Status	Target Group	Sanctions for non-compliance	Actions in support of the policy
Name, Responsible Ministry for implementation and monitoring (e.g. Health, Education, Employment, Criminal Justice)	What does the policy/legislation facilitate, mandate and/or promote?	Has the policy/legislation been submitted, discussed but not yet adopted, adopted?	Is there a focus on specific groups of young people in terms of age, sex or vulnerability (e.g. disabled, young sex worker, young drug users, etc.)?	What are the consequences of not complying with the policy/legislation?	Does the policy include reference to the development of a strategy/action plan for implementation, systems/indicators for monitoring implementation, etc.

¹¹⁸ Exception was made in the case of a child labour study and a study measuring HIV prevalence among men who have sex with men (2007), where more recent data was not available.

Criteria

Policies and legislation that:

- Have been submitted for endorsement/adoption (i.e. not early drafts);
- Include some explicit focus on young people (i.e. not general policies that have implications for young people as part of the general population, but that do not specifically mention them);
- Information will only be included in the matrix if it is obtainable from the documents (i.e. no additional research to explore status of implementation, dissemination, etc.)

Data for Programme Mapping

Details of Organisation	Programme Category	Target Group	Geographic Coverage	Programme Aims and Objectives, and Timeframe	Costs	Sustainability	Involvement of young people	Monitoring and evaluation
Name of the programme/project, website, contact person	Health, Education, Employment, Information, Skills development, Social protection (to be developed)	Age, sex, vulnerable groups (e.g. disabled, young sex worker, young drug users)	Whole country, selected cities or provinces	What are the aims, objectives and duration of the project? What did it seek to accomplish?	Programme costs, sources of funding,	Does the programme work through government structures; is it reliant on external resources; if the project is no longer functional what were the reasons for this?	Planning, implementation, monitoring and evaluation	Are there systems for monitoring the programme (e.g. coverage and quality); has an evaluation been carried out?

Criteria

The programme/project should be:

- Explicitly focused on young people (it may be within a more general programme but it must have some specific elements directed explicitly to young people);
- National in nature or, if provincial, should be reaching a reasonable number of young people;
- Either currently being implemented or planned (i.e. have a well-developed project document and funding/budget line), or, if considered to have been “good practice” but not currently functional, should have been implemented in the past five years).

Annex 4: Programmes Included and Excluded in the Programme Review

Table 1: Included programmes

	Organisation(s)	Name
1	Adventist Development and Relief Agency (ADRA)	Youth Empowerment Against HIV/AIDS (YEAH)
2	AFESIP	AFESIP
3	CARE International in Lao PDR	Marginalised Urban Women Programme; Legal Awareness and Life Skills for Women Project
4	CHAS	Drop-in Centres for Female Service Workers
5	Child Cultural Center (Ministry of Information, Culture and Tourism), UNICEF	Project on Radio -Television for teenagers
6	Child Cultural Center (Ministry of Information, Culture and Tourism)	Reading promotion programme
7	Christianity Agency of Norway to Lao PDR (NCA)	Project on building awareness of the bad effect of human trafficking and drug abuse in schools with surrounding community participation implemented
8	Community Learning International	Promoting Educational Development of Children and Youth in Lao PDR Communities
9	Friends International	Peuan Mit: Building a sustainable street children project
10	Handicap International	Preventing road traffic accidents and disabilities
11	International focal village agency (VFI)	Anti-Human trafficking Unit
12	Lao Life Skill Association, Plan International	Project on strengthening drug prevention, gender equality rights and promoting local knowledge in schools and community
13	Lao People's Revolutionary Youth Union Committee	Multiple projects
14	Lao Red Cross Society	Project on youth volunteer mobilization of Lao Red cross society into accident prevention along the roads and first aid implementation promotion
15	Lao Youth Radio and UNICEF	Harnessing the Power of Radio to Fulfill the Rights of Young People & Children in Lao PDR
16	LaoPHA	Project on helping women and children living with HIV/ AIDS and its impact to get access to health service
17	LaoPHA	Project on men who have sex with men
18	LWU	Vientiane Youth Centre
19	Ministry of Education	Life-skills based curriculum project
20	Ministry of Education and Sport, Department of Pre-school and Primary Education	Mekong Rainbow Project
21	Ministry of Health, Ministry of Education, WHO, UNICEF, and WFP	Weekly Iron Folate Supplementation (WIFS)

22	National Library, supported by Action With Lao Children (ALC) and Santi Volunteer Association (SVA)	National Reading Promotion Project
23	Plan International (Belgium)	Building civil society from the village up: participation, rights and gender equity for ethnic group adolescents
24	Power International	Improving access to education for children with disabilities in Oudomxay
25	Save the Children	Disaster Risk Reduction for Children (DREC)
26	Save the Children	Strengthening Child Protection Systems to Keep Children Safe
27	Save the Children , LYU	CRC Advocacy through radio and TV for children and youth; Children as Agents of Change
28	UNESCO	Mobile Teachers Programme (Primary Equivalency Programme) in Lao PDR and Lower Secondary Equivalency Programme in Lao PDR
29	UNFPA	Adolescents and Youth Cluster Programme
30	WHO	Control of Soil-transmitted Helminth (STH) Infections among School-Aged Children in Lao PDR
31	World Bank & YEAL	STEPS
32	World Education in the Lao PDR (WEL)	Unexploded Ordnance (UXO) Education and Awareness Project for School Children
33	World Food Program, Ministry of	School Meals Programme

Table 2: Excluded programmes

No.	Organisation	Name	Reason for excluding	Brief description
1	Save the Children	Early Learning in Primary Schools (ELPS)	Did not adequately target young people	This programme ran 2006-2012 in Luangprabang, Sayaboury, and Bolikhamxai provinces. It focused on training pre-school teachers and improving retention rates of students in grades 1 and 2.
2	UNWOMEN	Study on violence against women and girls in Lao PDR	Not a programme	Study explored the attitudes, perceptions, knowledge and practices of young men and women aged 15-18 years relating to gender roles and violence against women and girls.
3	UNESCO	Policy review of Technical and Vocational Education and Training (TVET) for Lao PDR	Not a programme	Aims to identify policy options and strategies for improving technical and vocational education and training (TVET) in Lao PDR. Report can be accessed here: http://www.unescobkk.org/resources/e-library/publications/article/policy-review-of-tvet-in-lao-pdr-unesco-2013/
4	UNODC	LAOK48:	Not focused on young people aged 10-24	Drug use prevention, treatment and reintegration, and alternative development Although some components engaged young people (eg. civic awareness campaign, International Day Against Drugs), did not have a sufficient youth focus.

5	World Renew (formerly CRWRC)	Preliterate Primer Pilot (PPP) project	Small geographical coverage	Small pilot project (2011-2012) in Mai District, Phongsaly Province. The project consisted of a basic literacy primer with supplementary teaching aids, training and support. The project tried to provide a foundation in reading and numeracy for youth and adult students (especially women) who did not have sufficient Lao language ability or basic education to cope with previously existing NFE curriculum. Was evaluated in May 2012.
6	Good Neighbours International (GNI)	Community-Based Education Project	Inadequate information available	Aims to improve access to and quality of education service in three districts of Vientiane Province. Activities include classroom construction, provision of educational material, extracurricular activities, and a child sponsorship programme.
7	Room to Read (RtR) Lao PDR		Inadequate information available	Operates in multiple districts in Bolikhamxaym Oudomxay, Phongsaly, Saravan, Savannakhet, Vientiane and Xayaboury provinces. Programme aims to increase educational opportunities for rural children in Lao PDR.
8	Children for Education Development Centre (CEC)	Library	Not focused on young people aged 10-24	Library open on weekdays, and activities conducted on weekends.
9	Association for Aid and Relief Japan (AAR),		Not focused on young people aged 10-24	Vocational training for people with disabilities.
10	Lao Disabled Women Association		Limited number of beneficiaries	Based in Vientiane capital, and provides vocational training for women aged 15-35 years with disabilities (in 2013 only 35 people benefited from the programme).
11	Donekoi and Nahai Development Centers		Limited number of beneficiaries	conduct activities and games with children from a village center, led by 5-10 volunteers
12	International Labour Organisation (ILO)		Not focused on young people aged 10-24	Works with the government on drafting employment policy, which may affect young people, but does not specifically target young people.
13	Huam Jai Asasamak (HJA)	Volunteer Internship Programme	Limited number of beneficiaries	Huam Jai Asasamak (HJA), a Lao Non-Profit Association (NPA), have implemented a Volunteer Internship Programme since August 2010. Programme objectives include to: promote volunteerism; increase opportunities for rural, women and ethnic youth in Lao PDR to participate in the development of their own communities; and to provide skills and experience contributing to future community engagement and employment opportunities of rural youth in Lao PDR. In the first intake, 15 volunteers were recruited and placed with eight partner organisations.

14	Ministry of Health	Human papillomavirus (HPV) vaccination demonstration project	Not focused on young people aged 10-24	The project, due to start in 2014, will run for two years, be implemented by the Ministry of Health and funded through the GAVI alliance. In its first year it will target girls in forms 4 and 5 of primary school, aged 9-10years, and out-of-school girls aged 9 years, in Vientiane Province. In its second year, it will target girls in form 4 of primary school in Vientiane Capital and Vientiane Province. The project will also explore the feasibility of incorporating the current deworming programme and other nutritional education activities into the HPV delivery in year 2. Nationwide scale up is intended following evaluation of the demonstration project.
15	National Disabled People's Association	Youth-oriented project	Inadequate information available	The National Disabled People's Association operated in Vientiane Capital and Vientiane Province. Its activities include vocational training, employment services, and advocacy. They run a youth-oriented project supporting disabled youth, but no further details were provided.

We identified 31 programmes that are directed to young people that currently or recently have operated in Lao PDR. However, in general these programmes are not adequately evaluated and the effectiveness of most programmes is therefore unclear. Areas that may require more concerted programming effort in the future include drug and alcohol use, mental health, disability support, vocational training and employment opportunities for young people.

The number of programmes targeting adolescents and young people in Lao PDR may be underestimated due to consolidated reporting, and under reporting by government and partner providers. Some programme providers provided information for more than one programme under the same set of objectives, funding and M&E. The LYU, for example, provided joint information for 13 programmes. These have been counted as one programme since it was not possible to separate the information for individual programmes.

Another limitation is that the identification of programmes was dependent on organisations responding to requests for information and for providing publically available information. Programmes not specifically targeted at adolescents or young people but with a high proportion of beneficiaries in this age group may not have been considered to be youth-focused programmes, and may thus have not been submitted for review. In addition, included programmes may be biased towards organisations operating in English or Lao language.

Finally, there was usually inadequate data available on young people's perspectives of the interventions being provided, and it was therefore not possible to assess how the services are understood, accessed or perceived by adolescents and young people themselves.

Figure 1: Provinces targeted by youth and adolescent programmes (n=33)

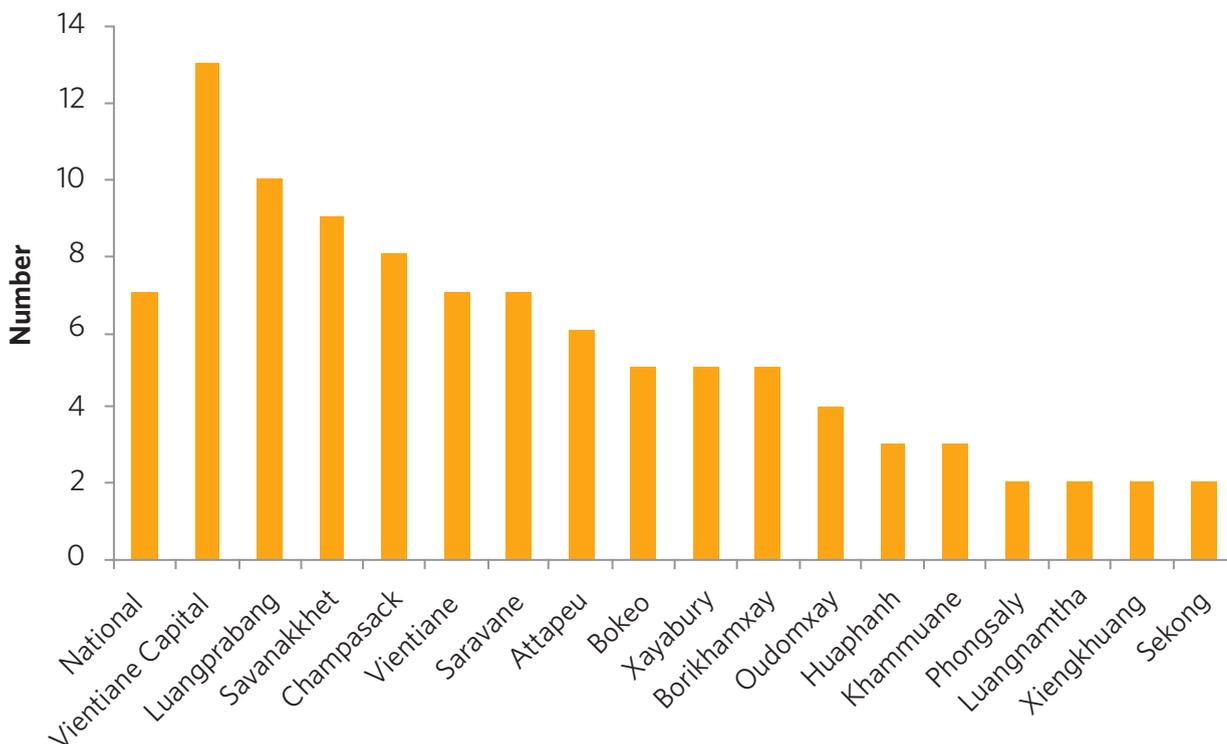
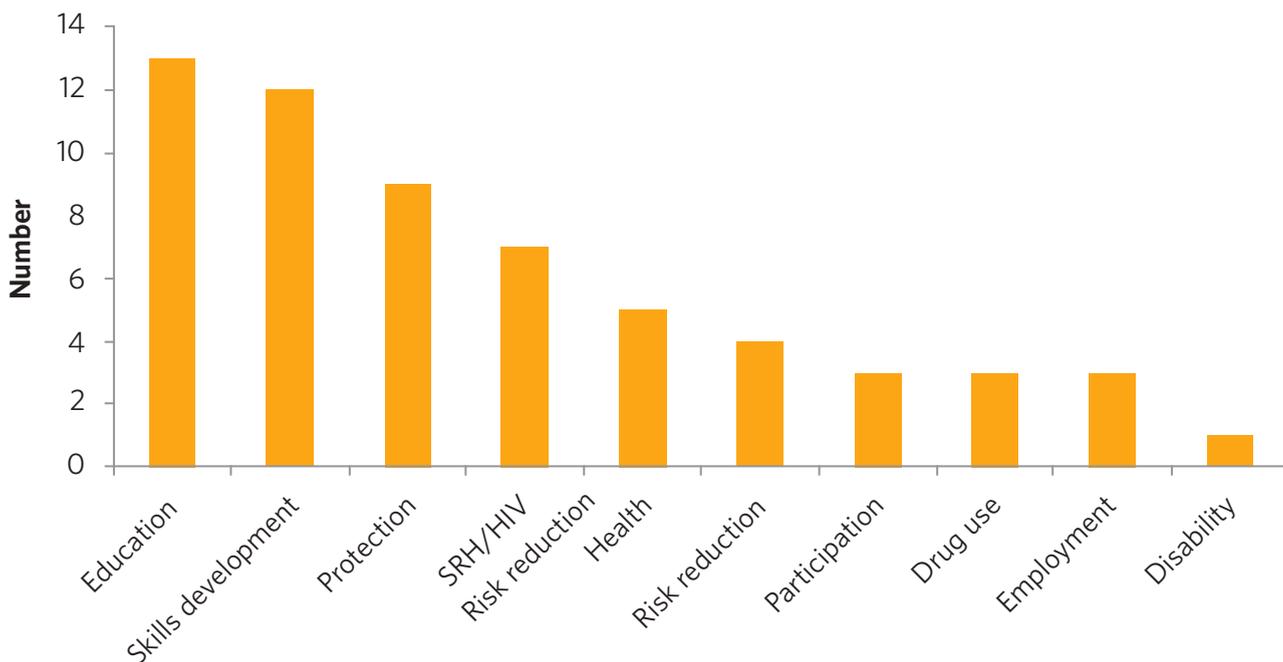


Figure 2: Programme categories (n=33)



Annex 5: Policies, legislation and strategies included in the Policy Review

Laws	Years
Civil Procedure Code (Amended)	2012
Criminal Procedure Code (Amended)	2004
Drug Law [Includes Law on Narcotic Drugs]	2007
Education Law	2007
Election of National Assembly (Election Law)	2010
Family Law	2008
Health Care Law	2005
HIV/AIDS Prevention Law	2011
Labour Law (Amended)	2007
Lao People's Revolutionary Youth Union Law	2009
Law Governing the Development and Protection of Women	2004
Law on Land Traffic	2000
Law on National Defence and Security	1995
Law on the Protection of Rights of the Child	2007
Nationality Law	2004
National Reproductive Health Policy	2005
Penal Code (Amended)	2005
Tobacco Law	2009

Annex 6: Documents reviewed as part of secondary data analysis

No	Title (Year)	Type	Author	Remark	Lang	National level?	Age dis-aggregated?	Soft copy
1.	Lao Social Indicator Survey (LSIS) (2012)	Research	UNFPA	Soft copy in multiple documents	Eng	National	Yes	Y
2	Assessment of Life-Skills Based Curriculum Project in Lao PDR. (2010)	Assess-ment report	UNICEF, Ministry of Education		Eng	9 provinces	No (only Grade 11 students)	Y
3.	Sewing the line, a qualitative baseline analysis of the risks and opportunities posed for young women...(2012)	Baseline report	AusAID, Care international, Lao Women Union		Eng	Vientiane Capital only	No (age not specified)	Y
4.	TRaC: Tracking Results Continuously (2010)	Report	PSI, CHAS		Eng	2 provinces (VTE Cap and SVK)	No (interviewees age 15-35)	Y
5.	Adolescent Migrants in the Greater Mekong Sub-region, (2007)	Research	National maternal and child health centre, Lao		Eng	Vientiane Capital only	No (interviewees age15-24)	Y
6.	Integrated Behavioural Biological Surveillance, (2008)	Survey Report	CHAS, FHI	Cover page in Eng but content in Lao	Lao	4 provinces only	No	Y
7.	Implementation of MoES plan 2011-20 12	Report	MoES		Lao	X	X	Y
8.	Child labor Survey 2010 in Laos	Report	ILO and MSLW LSB (MPI)		Lao	X	X	Y
9.	Assessment of Condom Programming in Lao PDR Year: April (2008)	Report	MoF + UNFPA	Improved 17/1/2013	Eng	4 provinces	No (various groups)	No
10.	Constraining factors for access to education and strategy to increase access to secondary education , (2009)	Report	MoES ADB BESDP (Basic Education Sector development Project)	Improved 17/1/2013	Lao	X	X	No

No	Title (Year)	Type	Author	Remark	Lang	National level?	Age dis-aggregated?	Soft copy
11	Mekong Erotics Men loving/pleasuring/using Men in Lao PDR	Research	Burnet Institute, Supported by UNESCO		Eng	4 provinces	No (ages 14-60)	Y
12	Labour Force and Using Child Labour Survey 2010	Survey report	ILO, Dept of Labour Management, Ministry Of Labour and Social Welfare, Laos Statistics Bureau Ministry of Planning and Investment		Eng	National level	Yes	No
13	Child labour in Lao Brick Sector (2004)	Research	Ministry of Labour and Social Welfare and National University of Laos		Eng	Vientiane province only	No (only children aged under 18)	Y
14	Amphetamine Type Stimulant Use and Sexually Transmitted Infection Risk among Young People in Vientiane Capital and Vientiane Province, Lao PDR (2009)	Research	CHAS, UHS, Burnet		Eng	2 provinces (VTE Cap and VTE province)	No (youth aged 15-25)	Y
15	Young Women's Sexual Behaviour Study Vientiane Capital, Lao PDR (2008)	Research	PCCA, Burnet, UNFPA		Eng	Vientiane Capital only	No (girls aged 15-24)	Y
16.	Country Gender Assessment for Lao PDR: Reducing Vulnerability and Increasing Opportunity	Report / Literature review	World Bank, ADB		Eng	N/A (lit review)	No	Y
17.	Internal Migration in the Lao PDR - An Exploratory Study	Exploratory study using data from censuses	Ministry of Planning and Investment		Eng	National level	Some data dis-aggregated	Y
18.	Social and Cultural Barriers To Rural Adolescent Ethnic Community Girls Accessing Lower Secondary Schools in Northern Laos	Research study	Plan and ChildFund		Eng	2 provinces (Bokeo & Xieng Khuang) only	No (girls aged 12-16)	Y
19	Socio-cultural influences on the reproductive health of migrant women	Literature review	UNFPA		Eng	Mixed (lit review)	Mixed (lit review)	Y

No	Title (Year)	Type	Author	Remark	Lang	National level?	Age dis-aggregated?	Soft copy
20.	Just Beginning: A qualitative baseline analysis of the risk of abuse and exploitation of sex workers in Vientiane Capital and subsequent access to legal services.	Baseline study	CARE		Eng	Vientiane Capital only	No	Y
21	Centre for HIV/AIDS/STI, Lao PDR - HIV/AIDS Case Report (2012)	Report	Centre for HIV/AIDS/STI (CHAS)		Eng	National Level	Yes	N
22	Rapid Assessment: Most-at-risk adolescents and young people to HIV in Lao PDR (2011; study conducted in 2010)	Report	UNICEF in partnership with the Ministry of Health		Eng	Primary research undertaken in Vientiane Capital, Vientiane Province, and Khammoune Province		
23	First Round HIV/STI Prevalence and Behavioural Tracking Survey among Male-to-Female Transgenderers in Vientiane Capital and Savannakhet, Lao PDR (2010)	Report	Population Services International		Eng	Vientiane Capital and Savannakhet	No	No
24	Characteristics of a Sexual Network of Behaviourally Bisexual Men in Vientiane, Lao PDR, 2010 (2013; study conducted in 2009)	Research study (peer-reviewed publication)	van Gemert C, Vongsaiya K, Hughes C et al.		Eng	Vientiane	No	No
25	HIV prevalence and risk behaviour among men who have sex with men in Vientiane Capital, Lao People's Democratic Republic, 2007 (2009)	Research study (peer-reviewed publication)	Sheridan S, Phimphachanh C, Chanli-vong N et al.		Eng	Vientiane Capital	No	No
26	Study on the perception and attitudes of young people on issues related to violence against women and girls in Lao PDR and Thailand. Final Report: Lao PDR (2012).	Report	UN Women Regional Office for Asia and the Pacific		Eng	Vientiane Capital, Champasak and Khammouane	No (aged 15-18)	No

No	Title (Year)	Type	Author	Remark	Lang	National level?	Age dis-aggregated?	Soft copy
27	Knowledge, attitudes and practices regarding HIV/AIDS among male high school students in Lao People's Democratic Republic (2013; study conducted in 2010).	Research study (peer-reviewed publication)	Thanavanh B. Harun-Or-Rashid M. Kasuya H. Sakamoto J		Eng	One province	No (males aged 16-19 years)	No
28	Care seeking behaviour and barriers to accessing services for sexually transmitted infections among female sex workers in Laos: a cross-sectional study (2012; study conducted in 2010)	Research study (peer-reviewed publication)	Phrasisombath K. Thomsen S. Sychareun V		Eng	Savannakhet province	No	No
30	Concurrent multiple health risk behaviours among adolescents in Luangnamtha province, Lao PDR (2011; study conducted in 2008).	Research study (peer-reviewed publication)	Sychareun V, Thomsen S, Faxelid E		Eng	Luangnamtha province	Yes (14-15 and 16-19 years)	No
31	Customary adolescent sexual practices among the Akha of northern Lao PDR: considerations for public health (2011; study conducted in 2009)	Research study (peer-reviewed publication)	Sychareun V, Faxelid E, Thomsen S, Somphet V, Popenoe R		Eng	Luangnamtha province	No (14-19 years)	No

Annex 7: Details of Site Selection for Primary Data Collection

Table 1: Key informant interviews/group discussions

Site (Province)	Setting	FGDs	Rationale
Northern region: Luangprabang Province (LPB)	i) Rural;	<ul style="list-style-type: none"> 2 FGDs with youth aged 10-14 years (male & female) in off-road area 	<p>For reasons of geographic representation, it was decided that the primary data collection would be conducted in one northern, one central and one southern province.</p> <p>The towns (and therefore provinces) of Luangprabang and Savannakhet were identified as sites for the urban FGD as they are amongst the largest urban centres in the country.¹¹⁹ Both provinces also have very rural areas for comparison.</p>
	ii) Rural off-road;	<ul style="list-style-type: none"> 2 FGDs (male & female) with youth aged 15-19 year in off-road area 	
	iii) Urban	<ul style="list-style-type: none"> 2 FGDs (male & female) with youth aged 15-19 years in rural area 2 FGDs (male & female) with youth aged 15-19 year in urban area 	
	<i>Note: one village will be selected in each area</i>	<ul style="list-style-type: none"> 2 FGDs (male & female) with youth aged 20-24 year in off-road area 2 FGDs (male & female) with youth aged 20-24 years in rural area 2 FGDs (male & female) with youth aged 20-24 year in urban area <p>TOTAL: 14 FGDs</p>	
Central region: Savannakhet Province (SVN)	i) Rural;	<ul style="list-style-type: none"> 2 FGDs with youth aged 10-14 years (male & female) in urban area 	<p>For the sake of comparison, urban, rural and off-road areas will be contrasted in one province (Luangprabang). In addition, each type of setting will be compared across at least two provinces.</p> <p>Attapeu, a very rural province with considerable ethnic diversity, was selected as the southern site.</p>
	ii) Urban	<ul style="list-style-type: none"> 2 FGDs (male & female) with youth aged 15-19 years in rural area 2 FGDs (male & female) with youth aged 15-19 year in urban area 	
		<ul style="list-style-type: none"> 2 FGDs (male & female) with youth aged 20-24 years in rural area 2 FGDs (male & female) with youth aged 20-24 year in urban area <p>TOTAL: 10 FGDs</p>	
Southern region: Attapeu Province (ATP)	i) Rural;	<ul style="list-style-type: none"> 2 FGDs with youth aged 10-14 years (male & female) in rural area 	<p>The three provinces selected all embody particular issues that impact on youth (domestic and international migration, sex work, changing livelihoods, logging, etc.).</p>
	ii) Rural off-road	<ul style="list-style-type: none"> 2 FGDs (male & female) with youth aged 15-19 year in off-road area 2 FGDs (male & female) with youth aged 15-19 years in rural area 	
		<ul style="list-style-type: none"> 2 FGDs (male & female) with youth aged 20-24 year in off-road area 2 FGDs (male & female) with youth aged 20-24 years in rural area <p>TOTAL: 10 FGDs</p>	
GRAND TOTAL (3 Provinces): 34 FGDs			

¹¹⁹ Vientiane Capital was specifically excluded, as the secondary data analysis found considerable existing data from the capital.

Table 2: Key Informant Interviews and Focus Group Discussion

Site (Province)	Setting	Interviews/group discussions
National level: Vientiane Capital	Urban	<ul style="list-style-type: none"> ▪ Government departments, UN agencies, INGOs, and NPAs that have youth focused programmes ▪ Migrant youth ▪ Youth with disabilities ▪ Drug users
Luangprabang Province (LPB)	Urban	<ul style="list-style-type: none"> ▪ Parents (of children aged 10-24 years) ▪ Village mediation unit (Village head/deputy head, Lao Front, Lao Youth Union, Women’s Union, and also teachers and health care providers) ▪ District representatives of health and education divisions, Lao Youth Union, Lao Women’s Union, Trade Union, police ▪ Monks ▪ Provincial Youth Union Committee ▪ Owner of entertainment venue
Savannakhet Province (SVN)	Rural	<ul style="list-style-type: none"> ▪ Parents (of children aged 10-24 years) ▪ Village mediation unit (Village head/deputy head, Lao Front, Lao Youth Union, Women’s Union, and also teachers and health care providers) ▪ District representatives of health and education divisions, Lao Youth Union, Lao Women’s Union, Trade Union, police ▪ Provincial Youth Union Committee ▪ Owner of entertainment venue
Attapeu Province (ATP)	Rural off road	<ul style="list-style-type: none"> ▪ Parents (of children aged 10-24 years) ▪ Village mediation unit (Village head/deputy head, Lao Front, Lao Youth Union, Women’s Union, and also teachers and health care providers) ▪ District representatives of health and education divisions, Lao Youth Union, Lao Women’s Union, Trade Union, police ▪ Provincial Youth Union Committee ▪ Owner of entertainment venue

Inclusion criteria for village youth participants in Focus Group Discussions

Prescriptive criteria (i.e. separate FGDs):

1. Sex (male/female)
2. Age groups (10-14; 15-19; 20-24 years)

Additional inclusion criteria for all FGDs:

3. In school and out of school youth
4. Employed and unemployed youth
5. Married and unmarried youth
6. Youth of various ethnicities (as relevant in each setting)
7. Members and non-members of LYU

Table 3: Overview of focus groups conducted in Luangprabang (LPB), Attapeu (ATP), Savannakhet (SVK) and Vientiane Capital (VC) Provinces

		Focus Groups					
		LBP	ATP	SVK	VC	Total	
Urban	Youth	10-14	0	0	2		2
		15-19	2	0	2		4
		20-24	2	0	2		4
	Parents	1	0	1		2	
	Village Leaders	1	0	1		2	
	District Leaders	1	0	0		1	
	Entertainment	1	0	0		1	
	Monks	1	0	0		1	
	University	0	0	0	2	2	
Rural	Youth	10-14	2	2	0		4
		15-19	2	2	2		6
		20-24	2	2	2		6
	Parents	1	1	1		3	
	Village Leaders	1	1	1		3	
	District Leaders	0	0	1		1	
	Entertainment	0	0	1		1	
Rural Off Road	Youth	10-14	0	0	0		0
		15-19	2	2	0		4
		20-24	2	2	0		4
	Parents	1	1	0		2	
	Village Leaders	1	1	0		2	
	District Leaders	0	1	0		1	
	Entertainment	0	1	0		1	
Total		23	16	16	2	57	

Table 4: Respondents of key informant interviews

Key Informant Interviews (KIIs)	
	VC
IOM	1
Care International	1
ILO	1
Lao Disabled People's Association	1
UNODC	1
Ministry of Health	1
Maternal and Child Health Centre	1
Ministry of Education and Sport	1
Ministry of Labour and Social Welfare	1
Ministry of Planning and Investment	1
Total	10

Annex 8: Summary of Findings

1. Health

Province	Rural	Urban
ATP	<i>Yabaa</i> ¹²⁰ use for recreation and fatigue. Malaria from lack of bed net use, working in the forest to collect rosewood. Use of abortion pill. Marriage as young as 12. Illness from food/personal hygiene. Prevalent use of alcohol, association with fighting and verbal abuse in families. Lack of money to pay for treatment/surgery leads to death. Dental care concerns. Lack of knowledge about sexual health, STI, Vaginal discharge. Knowledge of the “three cleans ¹²¹ ” among girls 15-19.	No Urban Area
LPB	Use <i>Yabaa</i> for fatigue. Malaria from work in fields and forest. Children get dengue. Alcohol use drives malaria but otherwise few concerns about drinking. Limited mention of abortion. Health infrastructure limited, undersupplied with medications. Unclean water a concern for kidney problems. Measles and possibly polio (paralysis) thought to be linked to seasons. Lack of knowledge about sexual health, hygiene.	Recreational use of <i>Yabaa</i> . Dengue hazard for restaurant staff. Lack of knowledge about dengue (bed net use not applicable as preventative). Alcohol use associated with illness and road injury. Much discussion on abortion. Water quality concerns. STI/unwanted pregnancy from unprotected sex. Shyness prevents treatment.
SVK	<i>Yabaa</i> for fatigue in older age groups, younger take <i>Yabaa</i> , glue for recreation, acting out. Younger girls (10-14) high awareness of abortion. Concern about tobacco smoking more than alcohol use. Use of traditional healers and remedies. Access to health care limited by transportation/treatment costs.	Experimentation with <i>Yabaa</i> leads to addiction. Strong association with violence. Some use to allay fatigue. Dengue outbreak compounded by lack of facility availability for care, crowding. No funds for treatment. HIV amongst married men. Alcohol use associated with fighting and racing. Tobacco factory air pollution is major concern. Illnesses due to lack of personal hygiene.

2. Education

Province	Rural	Urban
ATP	Lack of money for school supplies, transportation. Teachers use physical punishment “Beatings”. School is far away. Drop-out to work with their parents in slash and burn agriculture, coffee plantation or sawmills. Rural with road students desire to continue education but only top two students can receive scholarships. School is safe, other than expose to smoking. Fighting and teasing at school make youth dislike school. Free time spent in forest collecting wood for cooking or rosewood for sale, relaxing with friends. Girls collect wood and fetch water. During school vacation girls work in the home, boys may find paid work in S&B, collecting forest products, working in plantations. Distance, poverty, and illness stop youth from completing their education.	No Urban Area

¹²⁰ *Yabaa*: methamphetamine.

¹²¹ Three cleans: clean water and food, clean living environment, clean clothing (personal hygiene).

LPB	Parents don't support need for education. Particularly with girls who drop-out to marry at age 14-15. Boys drop-out to work. Girls are most positive and vocal for their desire to go to school, and the value of education. During free time, youngest youth play. During vacation older youth work in S&B or out of province. Students mention teachers hitting them in class. Many youth want to become teachers when they are older. Some would like to enter the police force (both M&F)	Youth more likely to drop-out to do business. Also leave school for marriage and because of cost. Girls 15-19 and 20-24 have strong aspirations for skilled work. Drug use and violence in schools make youth feel unsafe. School is modern, with air-conditioning, and no complaints about the learning environment. Desire support for good students to continue to learn.
SVK	Some work on farms, and don't attend school. Drop-out to work on family farm. Boys more likely to graduate. Handicrafts, food collection, household chores in free time (no sports). School is safe, but travel to reach it may be perilous. Lack of schoolyard for activities. Boys more vocal about learning, school. School vacation focused on farm work. Girls aspire to marry after school. Boys want to work in farming, or teach.	Some children don't attend school because of poverty, high rates of dropouts due to school cost, lack of interest in learning (both parents and children), <i>Yabaa</i> . Girls drop-out more than boys. Education continues after secondary for those with money and whose parents value education. Socialize, play sports, work in free time. School is safe. School hygiene is problematic during rainy season. Teachers collect money from students. Sports, activities and socializing are highlights at school. School yard/building in need of repair.

3. Employment

Province	Rural	Urban
ATP	Rosewood, construction, gardens, garment factory work, rubber/Eucalyptus/sugar cane/coffee plantations, fishing, S&B, panning for gold. Migrant work in Pakson, as <i>maeban</i> ¹²² in Thailand, regional construction work. Maybe be trafficked or go illegally. Paid 20,000 to 30,000 LAK/day as server, 600,000-800,000 LAK per month in coffee plantation. Some migrants return home to village to farm. Some come home as drug addicts. Seasonal farm labour is common, rice planting, transplanting, harvest. Men are able to find heavy work, women find it easier to obtain other types of work. Desire for more factories (garment, brick, sawmills), services like gas stations, transportation companies.	No Urban Area

¹²² *Maeban*: Housekeeper.

LPB	<p>Sell forest products Maak Neng (Cardamom), bamboo shoots and rattan. Work in S&B. Boys work in construction and young children find work carrying building materials at the site. Garment factories, labourer jobs, and restaurant work. Some go abroad to Thailand, and leave for work in VC, SVK, Sayabouly, Pakse, ATP, returning only for "Lao Soung" (Hmong New Year). Remuneration up to 1M LAK per month for men in construction, girls earn less in factories (300,000 LAK/month). Trafficking and child labour may be present. Unemployment the result of illiteracy, mostly men.</p>	<p>Work in the village consists of assisting parents, and working at wedding celebrations serving food and cleaning up. Drinking water factory, furniture factory, restaurant work, and car repair work is available for boys. "Most girls go to Thailand". Human trafficking and sex work locally and in Thailand, including becoming a well-compensated "Mia Noi" are risks for girls. Labourers earn low wages, 300,000-700,000 LAK per month, hotel workers earn more (900,000-1M LAK/month) and guides earn up to 1.4M LAK/month: "low knowledge=low salary". Teachers were not paid on time. Work available in market, selling things, in restaurants, construction and plantations. Women "do not have knowledge", don't speak foreign languages, didn't finish school and are not connected. Some contract STI, and have children which they as their parents to raise for them. Older youth struggle to find jobs that match their training, even with advanced study. "I am trained as an accountant, but the only jobs I find are for maeban". Most of the time girls have more difficulty finding work.</p>
SVK	<p>Find crabs and bamboo shoots, fish, do weaving, raise ducks, chicken, pigs and buffalo, plant gardens, and fetch water and wood for cooking. All unpaid work in the village to support their families. Occasionally a villager needs assistance and will pay 30,000 LAK per day for labourers to assist in S&B. Some construction work building houses in the village may be paid but in general work helping others in the village without income. Youth do not find paid work in this area.</p>	<p>Youth assist the family around the house, but also are involved in drug selling. Paid work is available in construction for older boys, in car repairs, and in the furniture factory. Restaurant work for both boys and girls. Mukdahan in Thailand, and other destinations where relatives may need them (Canada, France, Malaysia) are mentioned as destinations for migrant work which appeals because of its higher wage, and the opportunity to travel and experience development elsewhere. Labourer, sailor may be occupations for boys, and it is easier for them to find work than it is for girls. Human trafficking, to Thailand to work in massage parlours and spas is as risk for women. Work as beer girl [often can require sex work]. Young boys may be bonded labourers on fishing boats. Work in ITECC, the casino, various factories including the camera factory, garment factory, tobacco factory, and selling things in the market lure youth as young as 16. Women may become doctors and teachers, or work as government staff. Girls 15-19 believe that most of-fice jobs go to men. Loss of youth in the village is perceived as negative, with a lack of manpower, and loss of Lao culture from the village. Jobs are difficult to acquire without paying, or having connections, and because of low levels of education.</p>

4. Protection and Vulnerability

Province	Rural	Urban
ATP	<p>Thefts and violence accompany Yabaa use. Thefts of water pipes, electrical wire, even shoes. Other than beatings of family members to extract money from them, there is little violence. Within the family, physical and verbal abuse viewed differently to other violence, "Its normal", "It happens in the family". Fighting between husband and wife, physical abuse of children is mentioned by all youth. In rural areas without roads, drinking during festivals provokes fighting. Punishment ranges from education to jail. Disabled youth are supported in the ROR villages by assisting them to access health care, giving them rice and clothing, and bathing them. Rural villages reported a physically disabled person, "nobody helps them". Rural sites with roads mention one homicide, while ROR experience report safety, and report that there are no homicides.</p>	No Urban Area
LPB	<p>"There is chaos during a wedding", alcohol, insults, and disagreements between families. Fighting between youth aged 10-14. Drinking and driving cause accidents, and UXO explosions occur. Local authorities fine, even as much as "one buffalo" and counsel. "When they don't get along with others, you have to talk to them". Responsibility for mediation lies with "village head and national front".</p>	<p>Youths involved in fighting, murder, drug trafficking. Violent conflicts with police. "A group of 14-15 years olds set up a gang and then they sell and transport drugs". Theft and violence associated with drug use and glue sniffing. "Because they are in an amphetamine rage". Motorcycle racing creates a disturbance and risk of injury. "Some become handicapped from injuries". Rape, kidnapping and "exploitation" occur. Punishment may be severe. "Teachers slap them and twist their ears". Youth desire accountability from authorities. "If someone steals your bag, the police will catch them, but they bribe the police and they let them go". Trafficking of sex workers occurs.</p>

SVK	<p>Stealing predominantly food for survival, or for sale to earn money to survive. "Some steal pineapples to sell, steal chickens, steal rice" ; "Steal because the family is poor, steal chicken, steal pig, open the door and enter, and they take rice" In some cases, drug use drives theft "This person is a drug fiend, an opium or amphetamine addict. They steal chickens and ducks". Insulting and fighting between husband and wife, and between children. "Some families are poor, and there is family violence" Amphetamine use, glue sniffing, and "sickness" are the reasons for violence stated. Punishment, remediation through Baci ceremonies, with use of the legal system when necessary. District level authorities are involved for serious crimes. Perception that police "do nothing to them [thieves] just shout". Youth feel loss of security because of beatings, and amphetamine dealers. Disabled youth are assisted by others. "Difficult because that person is blind, cannot go anywhere, needs help from others".</p>	<p>Break ins, and bag snatching by drug addicts. Muggings with knives. Boys 16 years old steal fruit, chickens and ducks. At 17-18 smoke marijuana, sniff glue and then steal. Alcohol use also drives theft. Gambling debts, card playing may be either men or women. Rape, human trafficking mentioned. Fighting between youth, sometimes with knives. Youth advocate village headman and parental involvement to address violence. "Soukuan" apology ceremonies. Fines. "Fine them and if there is no improvement, send them to the Kumban [district]". Youth (girls) feel threatened by gangs, and thieves. "Not safe, there is fighting, shooting insulting youth drug addicts and people who do illegal things". M 20-24.</p>
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5. Participation

Province	Rural	Urban
ATP	<p>Youth interpret participation as the work they do for the village. "We do the work that the party and the government tells us, including making a fence for the hospital" . Other volunteer work includes road repairs, helping people move their houses, building houses, and assisting when someone dies. Youth cook food and rice to feed mourners. Youth assist in festivals and release the ceremonial fire-boats on the river. Jobs are highly gender specific. Girls cook rice; boys do harder physical work like carrying wood for fences, construction, mixing cement. Boys are involved in slaughtering animals for food. "Girls will do the light work, boys will do the hard work". ROR youth are focused on improving their lives for the future, through education, and setting a good example. Rural youth are focused on avoiding drunk driving, and fighting. Solidary and helping each other are important to rural communities. Youth feel they are involved in some planning activities, but have no involvement in problem-solving. For the future, rural youth hope for development, like buildings (with "escalators", bridges "across the Nam Seh" River, rice mills, and restaurants.</p>	<p>No Urban Area</p>

LPB	<p>"Everyone helps during festival" F 10-14 weddings, cleaning, cutting grass, harvesting rice. Boys slaughter pigs, assist with house construction. "Boys do hard work, girls do easy work" M 15-19. Much work is shared during "Lao Soum New Year". Boys may also "assist the village headman to look for bad guys" or "collect money" M 15-19. Girls feel they contribute by giving ideas and recommendations. They also feel "girls do more work" F 20-24. Their shared work is "very important, it creates solidarity (Sama khi)". Rural youth hope that water and electricity will be available to all, and that they will be able to assist in setting up the school. Participation is important to them, they have a strong desire for assisting each other, working together. "To help is best when we love each other". This group has the strongest expressions of the need for solidarity as an expression of community spirit, and participation. Boys may also have a strong desire for self-development "we must develop ourselves", " we want to have knowledge and be clever" M15-19. Girls are focused on obedience, respect for parents, setting a good example.</p>	<p>During festivals, boys work security and set up tables and chairs, serve water and ice. Girls stand in front to greet guests. During the boat ceremony, they carry boats to the river and light them. When the district requires youth volunteers, the village will send them. Participation "creates internal solidarity". Youth in this district hope for a chance to show what they are capable of. They recognize that through participation, they have a chance to do and to learn at the same time. The youth seek equal opportunities for learning, and freedom from discrimination. Girls 15-19 lament the changes in their culture, and the loss of Laos heritage. "everyone has a Korean hairstyle" F 15-19. For the future, the older boys 20-24 want a drug-free sport facility, the opportunity to have competitions for singing, and knowledge. They would like a village fund for youth, so they can start businesses. They feel under-represented by their youth leader. "Village headman decides, secretary of youth doesn't dare to decide".</p>
SVK	<p>Youth respond with community labour, collecting garbage, clearing land, cutting grass, constructing the school and assisting when someone dies. Youth solidarity "Sama khi" is important to completing necessary work in the village. "Because the village headman makes it important, we are asked to participate".</p>	<p>Hygiene campaigns and grass cutting, working during the festival, collecting garbage, serving at weddings, and when someone dies. Participation is how they protect their village, and the environment and "Lets adults see us". In the future, they wish for stronger drug enforcement, prohibition of pre-marital sex, and greater involvement in the village.</p>

6. Summary by Group and Geographic Region

Parents and Leaders	
Rural Off Road	<ul style="list-style-type: none"> • Support young marriage • Concerned about malaria and other risks of work in the forest • Awareness of health/hygiene strategies • Alcohol use is most common risk behaviour • Access to health care is difficult because of distance and cost • Communication barrier due to language skills for some ethnic groups • Low rates of education in children, "because they follow their parents" • Obligations to family drive youth's future • Limited desire for youth to leave the village to look for outside work • See authorities role as educator, discipline, setting example
Rural	<ul style="list-style-type: none"> • Think youth don't have enough health education, despite learning in school • Depend on TV for learning but access to TV is limited/non-existent • Distance to school, cost of education and clothing drives drop-out rate, often parent's decision • Obligations to the family also limit ability to obtain education • Dropping out to marry is common, and accepted especially for girls • Some young women will find work in beauty salons and restaurants, but most work in farming, or on plantations. • Migration to Vietnam, Thailand. • Child labour is common (age 10+), and accepted because the family is poor, and all work to help support the family • Parents think there should be rules about what time restaurants should close, and at what age youth can enter entertainment venues, like discos. • Spousal abuse, physical abuse of youth, verbal abuse are prevalent • Believe authorities have role in discipline, as educators • "Youth is the backbone of the country", desire to encourage and empower youth and create visibility to their needs
Urban	<ul style="list-style-type: none"> • See differences in ability to influence youngest age groups. 15-19 year olds are experimenting with life • Believe clothing and hair style choices are undermining Laos culture • Concern about drug use in boys, underage pregnancy, abortions in Thailand or locally, STIs/HIV in girls • Drop-out to do "business" or to marry, not as young or frequently as in rural populations • Mostly boys who drop-out, drugs are involved, desire to follow with friends • Even with a university education, money is needed to find a job • Less reliance on "authorities", more reliance on parents, teachers • Work in factories, work in Thailand as sex workers, labourers • See Lao youth as unskilled, can't work with cement, can't drive a car so limited ability to find work • Advocate vocational training • Limited child labour • Encourage youth to be entrepreneurial, open businesses • Link violence and crime to drug use • Would like to see focus on activities like music competitions and other events for youth • Recommend stronger focus on youth organisation

Annex 9: Summary of barriers to health, education, employment, protection and participation

1) Barriers to health

Barrier	Impact on Education
Financial	
Sell <i>yabaa</i> for money	Become addicted to <i>Yabaa</i>
No money for treatment at clinic or hospital	Don't go for treatment
No money for transport to hospital or clinic (may be road or boat transport)	Don't go for treatment
Lack of sexual health education	Early pregnancy, STI, Abortion. Lack of knowledge about their body [some of their health concerns may be normal discharge, etc.]
Unwanted children/unplanned pregnancy	Risk of dangerous abortion or unwanted children
Lack of money to buy condoms	Risk of STI/HIV
Work in forest to find food or rosewood	Get malaria, use <i>yabaa</i> to have energy to work. Don't have money to buy long sleeve shirts, so at risk for malaria
Lack of money to continue post secondary education	Lack of trained Ethnic physicians/nurses and physicians/nurses in rural areas who are from the local community
Organisational	
Drug trafficking is facilitated by new roads	Addiction becomes easier
Lack of legal framework/enforcement to prevent abuse of Alcohol -	Many drinking shops near the university, students drink too much and have road accidents. Others (not just students) have road accidents
Lack of awareness of food, water hygiene	Many illnesses
Health Centre not nearby	No access to treatment when needed. Tendency to seek traditional medicine or "private" drugs for treatment.
No treatment for drug users in some provinces (or no awareness of them)	No way to obtain treatment for drug users
Lack of awareness of traffic laws, lack of driving training	Risk of road accidents
Lack of aspirations for their future	Risk-taking behaviour
Lack of police enforcement of traffic laws	Too many people ride together on a motorbike and have accident

Socio-cultural	
Lack of birth spacing in some ethnic groups	[Not enough time between pregnancies to ensure health]
Early marriage leads to lack of time to plan for the future before starting a family	Dependence on physical labour
Shyness to discuss STI	Don't seek treatment because there is no confidentiality
Reliance on traditional beliefs for health care	Familiarity with traditional medicine practitioners makes accessing health care more difficult
Societal barriers to equality for girls and boys create friction between authorities/parents and girls	Girls want to do what boys do, drink, go out but they are more at risk for health issues
Ethnic Groups don't speak/read Lao	Health staff can't understand them. Don't understand health education presentation, don't understand health "dramas"
Live in the mountains, access is only seasonal, little contact with others	Lack of access by health staff, outreach programmes, health education training
Negative Peer Pressure	<i>Yabaa</i> , Early sex, smoking, alcohol, tobacco, racing motorcycles
Technical Barriers	
Lack of clean water	Causes kidney, bladder problems. Dehydration. It is normal for Ethnic people to use the river water, but the water is too dirty for them to use safely.
Get poor quality health care even when have insurance	Don't get adequate treatment - Get misdiagnosis, sometimes dengue fever is diagnoses as pregnancy. Sometimes there is no examination at all, just a prescription
Lack of Education	Don't understand healthy behaviour
Impregnated mosquito nets are too small or there are too few for the number family members	Get malaria due to exposure. Use mosquito nets from the market that are not impregnated.
Lack of electricity to support communication in the village	Health announcements can't be made to inform villagers about bed nets arriving, outreach etc.
Lack of equipment for health centre, drugs	Health centres can't perform, people don't want to go there
Health Insurance Scheme is limited in value	Quality of medications, and quality of care provided for those with health insurance is very low

2) Reasons for early school drop-out

Barrier	Impact on Education
Financial	
Lack of sexual health education	Drop-out of school
Unwanted children/unplanned pregnancy	Drop-out to get married
No money for treatment at clinic or hospital	Not well enough to attend school
No money for transport to hospital or clinic (may be road or boat transport)	Not well enough to attend school
The cost of education (primary and secondary) is too high for some families	School costs, books, clothing, pens and pencils are expensive
Parents become ill, can't work or child needs to earn money to support family	Youth must leave school to work for family (or to earn money)
Lack of money to continue post secondary education	Post secondary education is out of reach for most students. Costs of food, dorm, tuition is high.
Organisational	
Lack of awareness of food, water hygiene	Can't attend school when ill
Lack of connections to obtain good government positions	Can't get selected for scholarship
No dormitory for rural children to stay at secondary school	Children are unable to find lodging near secondary schools so drop out
Lack of teachers (or teachers don't show up)	Children drop-out, no school available
Lack of employment opportunities for graduates	Education may not be preparing them well for the jobs that are needed.
Lack of legal framework/enforcement to prevent abuse of Alcohol -	Excess drinking at university prevents drinkers from getting education and disturbs other students
Lack of aspirations for their future	Lack of desire/effort to get education
Lack of awareness of traffic laws, lack of driving training	Lack of education on laws
Lack of support to get a job - Information access	Lack of understanding/training on how to write a resume, letter, apply for a job. Interviewing skills
Lack of nearby school	No ability to attend without somewhere to stay
Lack of career counseling	Stream students to where the jobs are available
Lack of access to vocational training, Lack of official apprenticeship programmes	Youth without secondary school can't access vocational training

Socio-cultural	
Ethnic Groups don't speak/read Lao	[may be barrier to education]
Lack of birth spacing in some ethnic groups	Can't educate all children, old ones stay home to watch younger ones. Mostly boys are able to stay in school
Live in the mountains, access is only seasonal, little contact with others	Can't reach school to be educated, no where to stay near the school
Shyness to discuss STI	Don't acquire health education because don't ask about it
Lack of perceived value in education, education is not interesting, poor quality teaching	Drop of out to work, or just to play around. Teachers do not have adequate training so students learn little from them
Negative Peer Pressure	Drop-out of school
Early marriage leads to lack of time to plan for the future before starting a family	Early drop-out limits knowledge about life choices, options
Differing employment opportunities by gender	Girls are less likely to continue in school
Gender differences in education in Ethnic Groups	Girls are less likely to continue in school
Lao TV does not have many programmes so watch Thai TV	Increased peer pressure
Technical	
Get poor quality health care even when have insurance	Can't attend school
Lack of Education	Can't continue with vocational education without completing primary education
Lack of equipment for sports, lack of facilities	No equipment for sports activities

3) Barriers to education

Barrier	Impact on Education
Financial	
Lack of sexual health education	Drop-out of school
Unwanted children/unplanned pregnancy	Drop-out to get married
No money for treatment at clinic or hospital	Not well enough to attend school
No money for transport to hospital or clinic (may be road or boat transport)	Not well enough to attend school
The cost of education (primary and secondary) is too high for some families	School costs, books, clothing, pens and pencils are expensive
Parents become ill, can't work or child needs to earn money to support family	Youth must leave school to work for family (or to earn money)

Lack of money to continue post secondary education	Post secondary education is out of reach for most students. Costs of food, dorm, tuition is high.
Organisational	
Lack of awareness of food, water hygiene	Can't attend school when ill
Lack of connections to obtain good government positions	Can't get selected for scholarship
No dormitory for rural children to stay at secondary school	Children are unable to find lodging near secondary schools so drop out
Lack of teachers (or teachers don't show up)	Children drop-out, no school available
Lack of employment opportunities for graduates	Education may not be preparing them well for the jobs that are needed.
Lack of legal framework/enforcement to prevent abuse of Alcohol -	Excess drinking at university prevents drinkers from getting education and disturbs other students
Lack of aspirations for their future	Lack of desire/effort to get education
Lack of awareness of traffic laws, lack of driving training	Lack of education on laws
Lack of support to get a job - Information access	Lack of understanding/training on how to write a resume, letter, apply for a job. Interviewing skills
Lack of nearby school	No ability to attend without somewhere to stay
Lack of career counseling	Stream students to where the jobs are available
Lack of access to vocational training, Lack of official apprenticeship programmes	Youth without secondary school can't access vocational training
Socio-cultural	
Ethnic Groups don't speak/read Lao	[may be barrier to education]
Lack of birth spacing in some ethnic groups	Can't educate all children, old ones stay home to watch younger ones. Mostly boys are able to stay in school
Live in the mountains, access is only seasonal, little contact with others	Can't reach school to be educated, no where to stay near the school
Shyness to discuss STI	Don't acquire health education because don't ask about it
Lack of perceived value in education, education is not interesting, poor quality teaching	Drop of out to work, or just to play around. Teachers do not have adequate training so students learn little from them
Negative Peer Pressure	Drop-out of school
Early marriage leads to lack of time to plan for the future before starting a family	Early drop-out limits knowledge about life choices, options
Differing employment opportunities by gender	Girls are less likely to continue in school
Gender differences in education in Ethnic Groups	Girls are less likely to continue in school

Lao TV does not have many programmes so watch Thai TV	Increased peer pressure
Technical	
Get poor quality health care even when have insurance	Can't attend school
Lack of Education	Can't continue with vocational education without completing primary education
Lack of equipment for sports, lack of facilities	No equipment for sports activities

4) Barriers to Employment

Barrier	Impact on Employment
Financial	
No money for treatment at clinic or hospital	Not able to attend school (disabled)
No money for transport to hospital or clinic (may be road or boat transport)	Not able to attend school (disabled)
The cost of education (primary and secondary) is too high for some families	Limited education, job opportunities are scarce
Unwanted children/unplanned pregnancy	Fewer job opportunities for women
Lack of sexual health education	[Risk of dangerous employment because don't know risks for sex work]
Lack of money to buy condoms	[Lack of money may lead to sex work - barrier to safe employment]
Sell yabaa for money	[Barrier to safe employment]
Lack of money to continue post secondary education	Lack of post secondary education limits development in communities, and employment opportunities
Work in forest to find food or rosewood	[Barrier to safe employment, because forest work is dangerous, and can get malaria]
Organisational	
Lack of career counseling	Students don't plan their education around where the jobs will be when they finish school
Lack of access to vocational training, Lack of official apprenticeship programmes	Skilled workers are not available in Laos. (e.g.. Plumber, construction workers, carpenters, electricians)
Drug trafficking is facilitated by new roads	Selling <i>Yabaa</i> is an occupation
Lack of teachers (or teachers don't show up)	No education limits access to employment
Lack of awareness of food, water hygiene	No education limits access to employment
No market to sell forest products when they collect them	Lack of ability to earn money from products they collect in the forest

Lack of support to get a job - Information access	Jobs may be available but people have no way to hear about them
Lack of nearby school	Hard for rural children to find education-based jobs
Lack of employment opportunities for graduates	Connections may be needed in order to find the best jobs
Lack of connections to obtain good government positions	Can't get a good government job if you don't know someone who can help
Lack of Micro-finance options to start small businesses	Can't create jobs, or income because no capital to start a small business
Socio-cultural	
Negative Peer Pressure	No education limits access to employment
Live in the mountains, access is only seasonal, little contact with others	Limited job opportunities other than forest products and slash and burn. Few chances to earn money, just subsist
Early marriage leads to lack of time to plan for the future before starting a family	Limited exposure to other options than working in the family farm. No new employment idea exposure
Differing employment opportunities by gender	Fewer high paid jobs for girls
Gender difference in employment opportunities	Boys are more likely to be hired
Ethnic Groups don't speak/read Lao	[may be barrier to employment]
Technical	
Lack of Education	Without education they can't get higher paying jobs
Lack of experience, technical training	When they look for work, a high school diploma is not enough, they can't find good jobs, only can work as unskilled labourers
Get poor quality health care even when have insurance	Poor work performance

5) Barriers to Protection

Barrier	Impact on Protection
Financial	
Lack of sexual health education	Are not aware of risks associated with unprotected sex [rural]
Parents become ill, can't work or child needs to earn money to support family	Children may start work at 10 to support their family financially
Unwanted children/unplanned pregnancy	Family violence may result from immaturity, pressure of early children
Sell yabaa for money	Fighting, beating parents, stealing
Lack of money to buy condoms	Risk of coercion into unprotected sex
Theft, criminal activities result from poverty	Stealing chickens, rice to survive

Peer pressure to purchase expensive items creates financial stress	Youth may choose dangerous behaviour (sex worker, stealing) to get money to buy something trendy [iphone5]
Organisational	
Lack of aspirations for their future	Crime, drug use
Lack of legal framework/enforcement to prevent abuse of Alcohol -	Drinking is associated with fighting, road accidents
Lack of awareness of traffic laws, lack of driving training	Lack of road safety and knowledge of traffic laws leads to problems
Lack of enforcement when laws are broken	Law breakers are fined or only warned, and then steal again
No treatment for drug users in some provinces (or no awareness of them)	Once someone starts using drugs, it will be very difficult for them to stop
Lack of police enforcement of traffic laws	Risk of accident, injury
Socio-cultural	
Societal barriers to equality for girls and boys create friction between authorities/parents and girls	Girls seek access to places where they feel equal to boys, but those places don't yet see them as equal Makes it more dangerous for girls to be out
Lao TV does not have many programmes so watch Thai TV	Peer pressure from Thai culture
Shyness to discuss STI	Possible protection risk if untreated infection
Lack of perceived value in education, education is not interesting, poor quality teaching	Teachers may hit youth, or shout at them
Technical	
Lack of equipment for sports, lack of facilities	No safe place to play sports
Lack of electricity to support communication in the village	No warning system for village [loudspeaker]
Lack of experience, technical training	Young women with little education are at risk to be trafficked to Thailand to find work. They are enticed by high salary promises, but end up in dangerous work

6) Barriers to Participation

Barrier	Impact on Participation
Financial	
Unwanted children/unplanned pregnancy	Divorce/separation/ single parent status may limit village participation for youth
Lack of money to continue post secondary education	Only the wealthiest are able to obtain the education necessary for them to participate in village/district/provincial leadership

Organisational	
Lao Youth Union are not active in their village	Don't have representation, no voice
Lack of aspirations for their future	Lack of desire for involvement with the village
Youth perspectives are not involved in decisions in the village	The representative for youth in the village is very old [over 40] and doesn't represent youth in meetings with development agencies who come to the village. The youth depend on him, but are not able to speak out against him
Socio-cultural	
Negative Peer Pressure	Boys don't want to help in the village
Societal barriers to equality for girls and boys create friction between authorities/parents and girls	Girls want to be able to go out with their friends, and socialize like boys do
Live in the mountains, access is only seasonal, little contact with others	No access to hear about government programmes, initiatives, no voice
Technical	
Lack of electricity to support communication in the village	Lack of awareness for village events, lack of access to communication
Lack of equipment for sports, lack of facilities	No place for youth to compete in sports, have activities together