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## Youth Reproductive Health Policy *Country Brief Series* No. 3

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# Peru:

## Civil Society Key to Youth Policy Implementation

### Youth in Peru

Total population, all ages	27.5 million
Population ages 10–24	30%
Gross national income in purchasing power parity (GNI PPP) per person	\$4,880
Human Development Index rank	85
Average births per woman	2.8
Teen pregnancy rate	55 per 1,000
Infant death rate	33 per 1,000
Secondary school enrollment (M/F)	92/86%
Women 15–49 using any contraception	68%
Sexually active youth 15–19 using contraception	57%
HIV/AIDS youth prevalence (M/F)	.42/.18%
Median age at first marriage (F)	21.4 years
Median age at first intercourse (F)	19.0 years
Median age at first birth	22.2 years

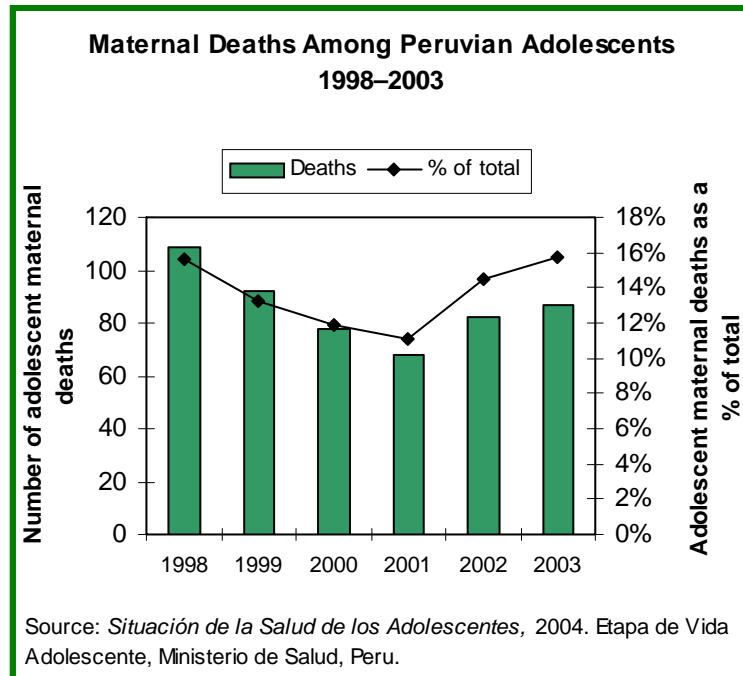
Sources available on request from the POLICY Project

The July 2001 approval of national youth policy guidelines in Peru was a milestone in improving programs for young people. Following the approval, the political environment changed dramatically, but civil society has successfully maintained a focus on youth and their reproductive health. Civil society groups and a coalition of youth-focused nongovernmental organizations (NGOs) have helped ensure the implementation of the youth policy guidelines and recently played a key role in the approval of specific guidelines on adolescent health.

### The Status of Youth in Peru

The 8 million Peruvians from ages 10–24 face a range of challenges. Over half of youth live in poverty, thus exposing

them to a variety of risks, including high rates of tobacco, alcohol, and drug use. Although the prevalence of HIV/AIDS is low in Peru compared with many other countries, new infections are concentrated among the young. Teenage birth rates are low relative to other countries in the region. However, national averages also mask large differences by education and income group, with less educated and poorer young women far more likely to have given birth. Moreover, the majority of births to teenage girls are the result of unintended pregnancies. Complications of abortion from these unintended pregnancies are a leading cause of maternal death for young women. The number of maternal deaths among teenagers, as well their proportion of the total number of maternal deaths, has been rising, as shown in the following graph.



## Policy and Program Environment

Wide swings have characterized the recent policy and program environment for youth reproductive health in Peru. The Fujimori government, ousted in November 2000, had placed a high priority on family planning and reproductive healthcare programs throughout the 1990s, and its actions included the establishment of specialized adolescent health clinics. Youth policy guidelines were approved in July 2001 under an interim president, a major step forward in garnering political support for youth programs. The guidelines were the first to comprehensively address education, health, employment, and citizenship issues for young people and included a section on reproductive health.

However, days after approval of the guidelines, yet another new government took power. Many of its key officials supported sharply curtailing or even eliminating family planning services in the public sector. Hopes for greater government action on youth reproductive health soon faded in the new political climate. At the same time, the government reshuffled responsibility for youth affairs. It eliminated the youth office of the Ministry for Women and Social Development and established a National Youth Council under the office of the president of the cabinet. Fortunately, the active involvement of civil society helped to maintain a focus on the youth policy guidelines and the political environment again shifted in 2004, this time with an upswing in official support for reproductive health activities.

## Recent Advances in Policy Formulation and Implementation

Since the 2001 approval of the national youth policy guidelines, youth-focused NGOs have played a significant role in keeping the government focused on implementing reproductive healthcare activities. Key actions include forming a youth NGO coalition and developing RH policy proposals.

*Forming a coalition of youth NGOs.* Spearheaded by the NGO *Redes Jovenes*, and with the support of the POLICY Project, 24 youth NGOs formed a coalition in 2002 to help institutionalize and implement the youth policy guidelines. The coalition sponsored several public discussions on the guidelines and actively engaged the government. The coalition's advocacy efforts resulted in action by city governments across Peru in support of adolescent reproductive health efforts. The coalition also held workshops to promote youth participation in policymaking. In 2003, the NGO coalition began participating in the advisory subcommittee of the newly formed National Youth Council. The coalition also forms part of the *ForoSalud*—the main NGO discussion group on health issues in Peru.

*Development of adolescent health guidelines.* A focus of the youth NGO coalition has been developing specific policy proposals on reproductive health. In 2004 and 2005, it was one of the main groups successfully advocating for Ministry of Health (MOH) guidelines on adolescent health. These guidelines, approved in February 2005, promote universal access by adolescents to integrated and differentiated health services, with special emphasis on mental and reproductive health. The 2001 youth policy guidelines, because they continue to be the overarching framework for government action on youth, facilitated the development of the new MOH guidelines.

### A Politician's Perspective

*Adolescence is an important stage of life. By serving the needs of adolescents, we are building identity and thus working toward a better Peru.* Dr. Pilar Mazzetti Soler, Minister of Health, Peru, at the ceremony marking the publication of the Adolescent Health Guidelines, February 14, 2005.

## Lessons Learned

*The importance of civil society.* The involvement of civil society was central to maintaining a focus on the youth guidelines and policies in Peru, particularly with the frequent changes in government actors and as support for youth reproductive health programs waxed and waned. A key to achieving the commitment of civil society was to involve it from the very beginning of policy formulation efforts in 2000. NGOs and other civil society groups concerned with youth maintain this commitment through their coalition-building efforts.

*Maintaining youth participation.* A major challenge is sustaining the participation of young people in the policy process. Civil society groups are important in this respect because they provide long-term stability even as individual youth “age out” of their involvement.

*The value of the youth vote.* One factor that keeps young people's issues on the political radar screen in Peru is the weight of the youth vote. Advocates have found this to be a persuasive argument in their work with the government and politicians.

## Sources

This brief draws on a number of POLICY Project background documents and on the recently approved Adolescent Health Guidelines of the Ministry of Health of Peru. For more information, contact Peru Country Director Patricia Mostajo at [pmostajo@policy.org.pe](mailto:pmostajo@policy.org.pe) or the POLICY Project at [yjh@policyproject.com](mailto:yjh@policyproject.com). Also, visit the website of the adolescent health program of the Ministry of Health of Peru at <http://www.minsa.gob.pe/portal/Servicios/SuSaludEsPrimero/Adolescente/adolescente.asp>. Visit [www.youth-policy.com](http://www.youth-policy.com) for full-text youth reproductive health policies from more than 45 countries and for related tools and information.

## About the *Country Brief Series*

This series highlights experiences in advancing youth reproductive health policy in developing countries, specifically in those countries where the POLICY Project has been an active partner in policy change. James E. Rosen prepared this brief under the direction of Nancy Murray, head of the POLICY Project's Adolescent Working Group. We are grateful to the reviewers of earlier versions. To see other briefs in this series, go to [www.policyproject.com](http://www.policyproject.com).

## About the POLICY Project

The POLICY Project works with developing country governments and civil society organizations to promote a more supportive policy environment for family planning/reproductive health, HIV/AIDS, and maternal health programs and services. The POLICY Project is funded by USAID under Contract No. HRN-C-00-00-00006-00. It is implemented by Futures Group in collaboration with The Centre for Development and Population Activities (CEDPA) and Research Triangle Institute (RTI).

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