

# SURVEYS AND ASSESSMENTS ON YOUNG PEOPLE AND COVID-19

DOMAINS, QUESTIONS AND RESOURCES

TECHNICAL BRIEF



## BACKGROUND AND RATIONALE

The health and non-health impacts of the COVID-19 pandemic on adolescents and young people, including those stemming from policy responses such as lockdowns, are proving to be significant. An understanding of these impacts is critical for informing governments' responses and recovery plans in addition to UNFPA's pandemic response and mitigation measures. Many organizations are conducting surveys or assessments, which can be strengthened through reference to prior relevant practices in survey design and impact assessment.



## TARGET AUDIENCE FOR THIS GUIDANCE

This guidance note is intended for UNFPA country offices and their implementing partners who are involved in monitoring/ assessing the impacts of COVID-19 and adapting programmes and interventions for young people. Domains of assessment are provided, along with relevant links to existing surveys, where specific questions can be drawn or adapted. For mandate-specific domains, more detail is provided.



# PART I

## KEY MESSAGES

- Many surveys on the impacts of COVID-19 have been or are being conducted, and many include an explicit focus on young people or are targeted specifically at young people. Before considering new surveys, use data and results from existing surveys to avoid overburdening partners and respondents, and duplicating studies. Gender-/age-disaggregated analysis of existing data will be particularly important.
- Data and evidence from the following sources can be useful to assess the situation of young people amidst the COVID-19 pandemic, **if data are appropriately disaggregated and if relevant content areas are covered**. Advocacy to ensure attention to young people in these types of data collection, as well as youth involvement, is essential:
  - a. key informant interviews with community leaders, service providers and frontline workers;
  - b. rapid assessment/mapping of services as well as data on service delivery;
  - c. news media reports.
- Be ready for multiple waves of pandemic impact, and accordingly consider multiple waves of surveys/data collection (including longitudinal studies if possible).
- There are many relevant domains of impact, so pursue data collection through partnerships and/or in conjunction with existing programmes. At the same time, short questionnaires are essential for high response rates, so limit domains and the number of questions within each domain to those that are most relevant.
- Commit to sharing data, findings and recommendations publicly and with relevant stakeholders, including youth and community groups. Advocate for partners to do the same.
- Whenever possible ask for respondents' age/date of birth; do not provide age intervals or brackets. Collecting individual age or date of birth information provides flexibility in aggregating data into various age ranges, and can prolong the usefulness of the data. See the demographic section below for further details.
- Report results consistent with survey design and sampling. If sampling is network-based/ non-representative, ensure that results refer to those who responded to the questionnaire, not "youth" or national populations, etc.

- Account for age, gender and educational disparities in access to technology, or other limitations that may make a sample biased towards better-off groups. Specific outreach to marginalized groups, through representative organizations, can help increase response rates and the diversity of respondents.
- Do not include questions that may put respondents at risk. For example, do not ask about personal experiences of gender-based violence if conducting phone or text message (SMS) interviews with participants who are taking part from home. Answers to these questions will be affected by participants' safety in responding, privacy in the home and trust in confidentiality, probably leading to significant undercounts.
- Surveys may lead to disclosures about missing services, so prepare data collectors with up-to-date referral information about social protection programmes, health providers, emergency hotlines, etc. The pandemic may have altered schedules or availability of some services.
- Conducting in-person interviews may contradict lockdown rules in many countries and put into question the safety of data collectors as well as respondents. Focus on alternative paths for data collection and ensure that platforms for collection (SMS, telephone, WhatsApp, videoconferencing, etc.) are context-specific and accessible.
- Make sure to avoid technical jargon in surveys. As far as possible, test questionnaires with a small group of participants before distributing them widely.
- Collecting information from subjects requires informed consent from participants over the age of 18. Interviewers must explain the purpose of the survey, lay out the procedure by which the respondents answers will be protected and clearly explain that the respondent will not benefit directly from the survey. Potential respondents should be given time and space to ask questions and decide if they would like to participate. Children under the age of 18 require informed assent indicating their willingness to participate and parental consent. At least one guardian must be provided with the information required for informed consent, so that they may decide whether or not to allow the child to participate in the study. Consider if these prerequisites of safety and confidentiality can be met in rapid assessments and in studies where participants are recruited remotely.<sup>1</sup>

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<sup>1</sup> UNFPA's Asia Pacific Regional Office (APRO) has developed a survey consent form with an added guardian consent form for participants under the age of 18. Although this form has no dedicated space for respondents to express any concerns they may have, a contact email address may be included for interviewees to ask questions.

## PART II

# DOMAINS OF INQUIRY

Evidence shows that young people are key 'spreaders' in their communities. Mapping their interactions with their communities and their perceptions of procedures put in place to mitigate the pandemic in their contexts is essential for understanding the spread of the pandemic. The following section outlines relevant domains of inquiry to better understand adolescents and young people in the context of COVID-19 - each domain is presented with example surveys and/or assessments.



## CIRCUMSTANCES OF LOCKDOWN

- Respondents' compliance with lockdown measures, risk perception and trust in public policy to mitigate impacts
- Perspectives on government's response: is response proportional, are responses effective (are responses – e.g. food/nutrition support, cash assistance – perceived to reach/benefit young people, not just households)?
- Stigma/misconceptions about those who may have come in contact with the disease
- Information and service delivery platforms (YouTube, apps, hotlines, SMS, radio, TV, chatrooms, bots, etc.), to understand effective pathways for communicating about COVID-19 and delivering services to different subgroups of interest
- Respondents' engagement with an essential activities for the maintenance of critical infrastructure during the pandemic

### SURVEY EXAMPLES

Harvard Humanitarian Initiative, [Global COVID-19 survey](#)

Organisation for Economic Co-operation and Development (OECD), [survey on the science and innovation policy responses to COVID-19](#)

## IMPACTS ON EDUCATION

- Access to formal/non-formal education/vocational training
- Changes in modality of learning
- Frustration with or fears about new ways of learning and absorbing information
- Delays in reaching educational milestones
- Changes in academic plans for the future (e.g. taking standardized exams, university attendance, graduate school, dropping out)
- Cyberbullying, trolling or any other forms of online harassment experienced or witnessed by young people who are working from home or have had education shifted to online platforms

### SURVEY EXAMPLES

United Nations Educational, Scientific, and Cultural Organization (UNESCO), United Nations Children's Fund (UNICEF) and World Bank, [survey focusing on education and mass school closures, National education responses to COVID-19 school closures](#)

The United Nations Sustainable Group in Latin America and the Caribbean (LAC) and the members of the LAC Interagency Task Team, [survey focusing on education, employment, health impacts and contraceptive access, United Nations survey on youth in Latin America and the Caribbean within the context of the COVID-19 pandemic](#)

## HEALTH IMPACTS OF COVID-19 AND RELATED KNOWLEDGE/ ATTITUDES/BEHAVIOURS

- Stocktaking of health literacy: participant's understanding of basic information about the virus and how to protect him-/herself
- Access to accurate information about the pandemic and its implications
- Mental health concerns related to COVID-19
- Negative and positive coping mechanisms

### SURVEY EXAMPLES

Population Council, [KAP Studies: Kenya, COVID-19-related knowledge, attitudes, and practices in urban slums in Nairobi; Bangladesh, COVID-19-related knowledge, attitudes, and practices among adolescent girls; India, COVID-19-related knowledge, attitudes, and practices among adolescents and young people in Bihar and Uttar Pradesh](#)

Joint United Nations Programme on HIV/AIDS (UNAIDS), United Nations Development Programme (UNDP), UNICEF, UN-Women and Youth Voices Count, [Assessing the needs of young key populations during COVID-19 outbreak in Asia and the Pacific, Preliminary findings](#)

United Nations and World Health Organization (WHO), [Civil society survey on misinformation about COVID-19](#)

## IMPACT ON CIVIC SPACE AND PARTICIPATION, ELECTIONS, MASS MOVEMENTS, SURVEILLANCE

- Changes in engagement with unions, political parties, youth organisations
- Changes in modes of activism, participation in protests
- Concerns over state or private surveillance (i.e. contact tracing, long-term implications for right to privacy and trust in government)



### SURVEY EXAMPLES

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OECD, Youth and COVID-19: response, resilience and recovery

## ECONOMIC IMPACT

- Impacts on employment, unemployment, reduced hours, etc.
- Changes in income, savings
- Outlook for career, job prospects, labour market
- Benefits received from government (i.e. unemployment benefit, cash transfers)
- Changes in domestic work and caregiving burdens (i.e. caring for younger children, dependants, housework)



### SURVEY EXAMPLES

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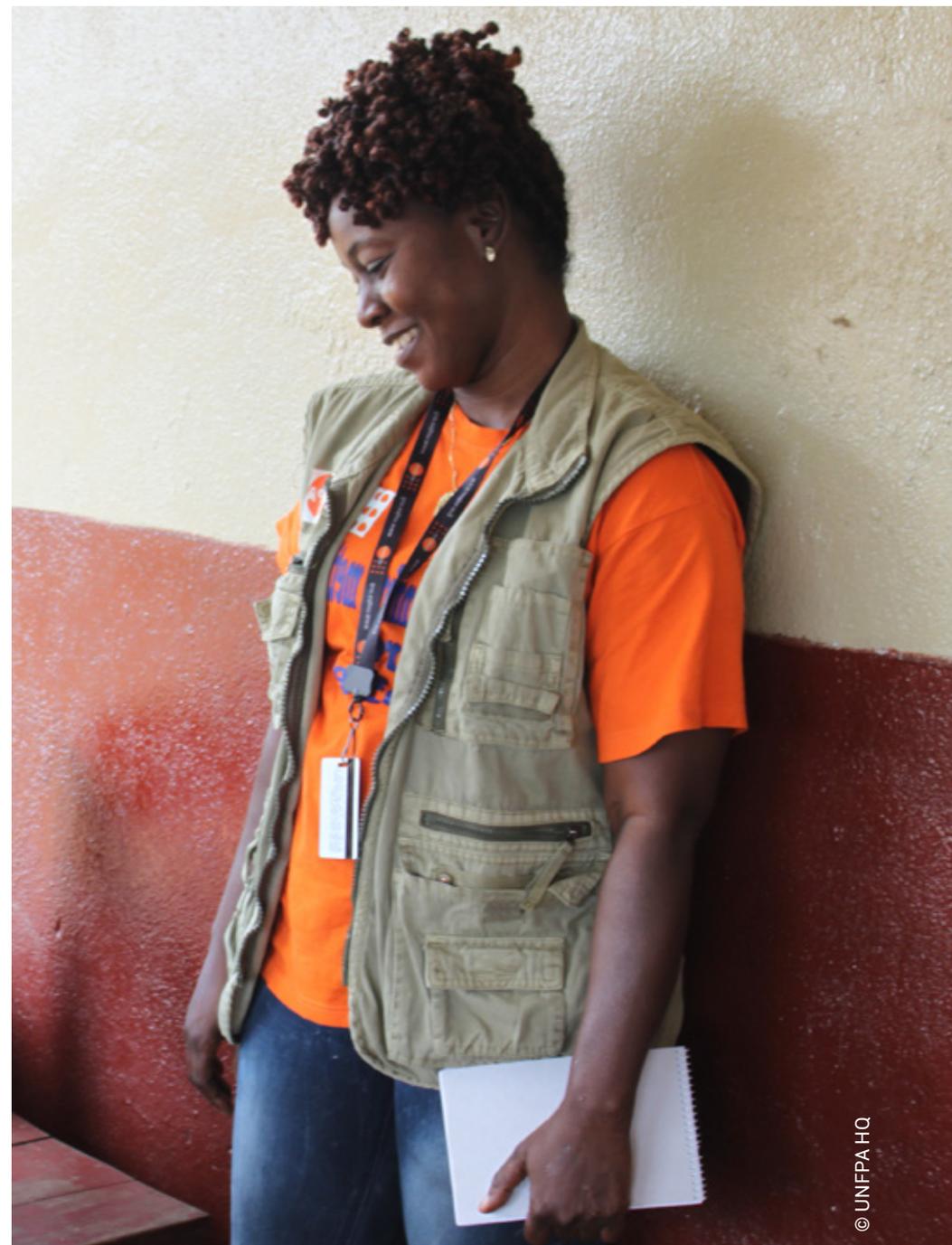
Global Initiative on Decent Jobs for Youth (United Nations Major Group for Children and Youth, AIESEC, the European Youth Forum, the European Union Emergency Trust Fund for Africa, the United Nations Human Rights Office and the International Labour Organization), survey focusing on employment and education, Global survey on youth and COVID-19

UNDP and Citi Foundation, survey focusing on employment and entrepreneurship in Asia-Pacific, Youth Co:Lab rapid assessment

# PART III

## DEMOGRAPHIC QUESTIONS AND RESOURCES THAT ALLOW FOR EFFECTIVE ANALYSIS AND DISAGGREGATION

Basic questions on age, sex, education, mobility, household composition, race and ethnicity, and the like must be correctly structured to allow appropriate analysis/disaggregation of survey/assessment findings. The following resources provide relevant guidance.



**COVID-19-SPECIFIC RESOURCES:**

- United Nations Department of Economic and Social Affairs (UNDESA), [COVID-19 statistics hub](#)
- Governance Lab, [COVID-19 data collaborative repository](#)
- World Bank Group, [Mobile Phone Panel Surveys in Developing Countries; High Frequency Mobile Phone Surveys of Households to Assess the Impacts of COVID-19 \(Vol. 4\): Questionnaire Template](#)
- UN Global Pulse, [COVID-19 data protection and privacy resources](#)

**AGE:**

- Compact for Young People in Humanitarian Action, [Data collection & age disaggregation](#)
- UNICEF, [Collecting and Reporting of Sex- and Age-Disaggregated Data on Adolescents at the Sub-National Level](#)
- WHO, [Illustrative Questionnaire for Interview-Surveys with Young People](#)

**EDUCATION:**

- UNESCO Institute for Statistics, [Essential Education Data Collection Fact Sheet: primer on the collection of essential education data during COVID-19](#)
- UNESCO Institute for Statistics, [Data for the SDGs Project, Internationally comparable education data guidances, Data and analysis needed to reach out-of-school children and youth](#)
- [Evidence for Gender and Education Resource](#)

**SEX, GENDER IDENTITY, ETC.:**

- The [Evidence and Data for Gender Equality \(EDGE\) project](#) (joint initiative of the United Nations Statistics Division and UN-Women)
- UNDESA and Statistics New Zealand, [Gender identity – developing a statistical standard](#)
- UN-Women and WHO, [Violence against women and girls data collection during COVID-19](#)
- Data2X, [Gender and Data Resources Related to COVID-19](#)

**DISABILITY:**

- Washington Group, [Short set of disability questions](#)
- Washington Group and UNICEF, [module on child functioning questions](#)

**RACE/ETHNICITY, ADJUSTED FOR NATIONAL CONTEXT:**

- United Nations Statistics Division, [Social and demographic surveys](#)

**REFUGEE, INTERNALLY DISPLACED PERSON OR MIGRANT STATUS:**

- United Nations Statistics Division and Expert Group on Refugee and Internally Displaced Persons Statistics, [International recommendations on refugees statistics](#)

**COMPOSITION OF HOUSEHOLD (CHILDREN, PARENTS, SIBLINGS, FRIENDS, ETC.):**

- WHO, [Survey tool and guidance: behavioural insights on COVID-19](#)
- UNDESA, Statistics Division, [Designing Household Survey Samples: Practical Guidelines](#)

# PART IV

## EXAMPLES OF QUESTIONS RELATED TO SEXUAL AND REPRODUCTIVE HEALTH AND YOUTH EMPOWERMENT

The following questions are intended to be a point of departure to better understand the sexual and reproductive health (SRH) rights of adolescents and young people in the context of COVID-19, to adapt programming and learn from the response to the pandemic from young people's perspectives and experience. Questions should always be adapted to local circumstances and priorities, and the data collection, presentation and dissemination must be done with caution, applying strict confidentiality measures, given the potential sensitivity of adolescent and youth SRH rights. Take into account differences in access to education, access to adolescent-specific programming such as comprehensive sexuality education services, safe spaces, restricted mobility, access to technology and livelihoods/earning that may be based on gender.



## ACCESS TO ADOLESCENT SRH SERVICES AND SUPPLIES

Since the pandemic began, have you received any information about where and how to seek sexual and reproductive health services, including contraceptives, during COVID-19, recognising that the delivery of some services may have changed?

- Yes (specify)/No, Not needed

In context of the lockdown, have you experienced any issues in accessing any of the following sexual and reproductive health services when needed?

- Contraceptive counselling
  - Y/N, Not needed
- Contraceptives, including emergency contraceptives
  - Y/N, Not needed
- Intrauterine device (IUD)
  - Y/N, Not needed
- Implant
  - Y/N, Not needed
- Combined oral contraceptive
  - Y/N, Not needed
- Progesterone-only contraceptive
  - Y/N, Not needed
- Condoms
  - Y/N, Not needed
- Internal condoms
  - Y/N, Not needed
- Emergency contraceptive (EC) pill
  - Y/N, Not needed

- Gender-affirming hormone therapy
  - Y/N, Not needed, I have never been able to access needed hormone therapy
- Safe abortion care
  - Y/N, Not needed
- If yes, mifepristone and misoprostol or misoprostol only
  - Y/N, Not needed
- If no, surgical abortion (manual vacuum abortion (MVA) or dilation and evacuation (D&E))
  - Y/N, Not needed
- Post-abortion care
  - Y/N, Not needed
- Sexually transmitted infection (STI) testing and/or treatment
  - Y/N, Not needed
- HIV treatment and/or testing
  - Y/N, Not needed
- If yes, antiretroviral medication
  - Y/N, Not needed
- Human papillomavirus (HPV) immunization (category applicable largely to younger adolescents)
  - Y/N, Not needed<sup>2</sup>
- Services for gender-based violence or intimate partner violence
  - Y/N, Not needed

In the context of the lockdown, have you felt safe in accessing any of the following sexual and reproductive health services when needed?

- Contraceptive counselling
  - Y/N, Not needed, I have never been able to access contraceptive counselling
- Contraceptives, including emergency contraceptives
  - Y/N, Not needed
- IUD
  - Y/N, Not needed, I have never been able to access an IUD
- Implant
  - Y/N, Not needed, I have never been able to access an implant
- Combined oral contraceptive
  - Y/N, Not needed, I have never been able to access combined oral contraceptives
- Progesterone-only contraceptive
  - Y/N, Not needed, I have never been able to access progesterone-only contraceptives
- Condoms
  - Y/N, Not needed, I have never been able to access condoms
- Internal condoms
  - Y/N, Not needed, I have never been able to access internal condoms
- Emergency Contraceptive pill
  - Y/N, Not needed, I have never been able to access an emergency contraceptive
- Gender-affirming hormone therapy
  - Y/N, Not needed, I have never been able to access needed hormone therapy

2 UNAIDS, Assessing the needs of young key populations during the COVID-19 Outbreak in Asia and the Pacific.

- Safe abortion care
  - Y/N, Not needed, I have never been able to access safe abortion care
- If yes, mifepristone and misoprostol/ misoprostol only
  - Y/N, Not needed
- If yes, surgical abortion (MVA or D&E)
  - Y/N, Not needed
- Post-abortion care
  - Y/N, Not needed
- STI testing and/or treatment
  - Y/N, Not needed
- HIV treatment and/or testing
  - Y/N, Not needed
- If yes, antiretroviral medication
  - Y/N, Not needed
- HPV immunization (category applicable largely to younger adolescents)
  - Y/N, Not needed<sup>3</sup>
- Services for gender-based violence or intimate partner violence
  - Y/N, Not needed

If needed, have you experienced any delay or disruption in accessing essential means to prevent HIV infection due to the COVID-19 outbreak?

- Condoms
  - Y/N, Not needed
- Opioid substitution therapy
  - Y/N, Not needed, I have never been able to access needed OST

3 UNAIDS, Assessing the needs of young key populations during the COVID-19 Outbreak in Asia and the Pacific.

- Clean needles and syringes
  - Y/N, Not needed, I have never been able to access needed clean needles/ syringes
- Pre-exposure prophylaxis (PrEP) or post-exposure prophylaxis (PEP)
  - Y/N, Not needed, I have never been able to access PrEP or PEP
- HIV testing
  - Y/N, Not needed<sup>4</sup>

Since the start of the pandemic, do you feel safe accessing any of the following services?

- Tick all that apply: non-judgemental counselling for your reproductive health, psychological support or counselling, antiretroviral medication you may require, routine STI testing, contraceptives, other (specify) If no, why not?<sup>5</sup>

What materials for managing your menstruation are available in the local market under circumstances of lockdown? Have you had difficulties accessing these materials while lockdown measures are in place? Can you afford the materials you prefer to use to manage your menstruation? Before the coronavirus shut schools, did you use the sanitary infrastructure at school to manage your menstruation?<sup>6</sup>

4 UNAIDS, Assessing the needs of young key populations during the COVID-19 Outbreak in Asia and the Pacific.

5 UNFPA ESARO, Restless Development, UNAIDS, AfriYAN and UNESCO, 'Have your say!' Survey.

6 Swiss Red Cross, Knowledge, Attitudes and Practices Concerning Menstrual Hygiene Management (MHM) of Adolescents in Rural Primary Schools in Malawi.

## MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

How anxious are you about COVID-19?

- Scale (1 to 5) from not anxious to extremely anxious) What concerns you most?<sup>7</sup>

Under the lockdown, do you feel lonely, depressed, stressed, anxious or irritable?

- Never, Sometimes, Mostly, Other (specify)<sup>8</sup>

During lockdown, how have you spent your last 24 hours?

- Sample responses include care of sick members of your household (COVID-19 symptoms only), housework, study, caring for siblings or children, leisure, religious work, other (specify)<sup>9</sup>

For how many days have you stayed at home all day, without going out at all and without receiving any visits?

- (--)<sup>10</sup>

7 UNAIDS, UNDP, UNICEF, UN-Women and Youth Voices Count, Assessing the needs of young key populations during the COVID-19 Outbreak in Asia and the Pacific.

8 Population Council, Bangladesh, COVID-19-related knowledge, attitudes, and practices among adolescent girls.

9 Population Council, Bangladesh, COVID-19-related knowledge, attitudes, and practices among adolescent girls.

10 Population Council, Bangladesh, COVID-19-related knowledge, attitudes, and practices among adolescent girls.

Have you ever been diagnosed by a doctor or therapist with one or more of the following?

- Answer yes or no: a. Depression, b. Mania/bipolar disorder, c. Psychotic disorders (including schizophrenia), d. Anxiety disorders, e. Post-traumatic stress disorder, f. Eating disorder, g. Obsessive-compulsive disorder (OCD), h. Substance abuse or addiction, i. Attention disorder (ADD or ADHD), j. Personality disorder, k. Autism spectrum disorder.<sup>11</sup>

Are you currently receiving psychotherapy?

- Y/N

→ If no, were you previously receiving psychotherapy and stopped due to barriers associated with COVID-19?

- Y/N

→ If yes, how are you receiving psychotherapy (face-to-face, digitally, etc) If you receive psychotherapeutic treatment digitally, how satisfied are you with your treatment?

- ( )

## MEASUREMENT OF SOCIAL ISOLATION<sup>12</sup>

Since learning about COVID-19, have you had less communication with family and friends?

- Y/N, Don't know

Since learning about COVID-19, have you been more worried about going to public places, such as school, health centres, market, or community centres?

- Much more worried, more worried, somewhat more worried, not more worried

Has anyone in your household stopped you from leaving the house (Y/N), going to work (Y/N), going to school (Y/N) etc., because of COVID-19?

How has your participation in housework at home changed during lockdown?<sup>13</sup>

- Increase, decrease, stay the same

I feel that there is always someone I can talk to about my day-to-day problems.

- Strongly agree, Agree, Disagree, Strongly disagree

How many friends would you say you have here in this community? By a friend, I mean someone around your age whom you can talk to about your day-to-day problems.

- More than 5, 3 or 4, 1 or 2, None

Under the lockdown, how often do you see, in person or virtually, these friends?

- Every day, A few times per week, Once per week, Less than once per week, Never

11 Ludwig Maximilian University Munich (Germany) and University of Oxford (UK), The COVID-19 Pandemic Mental Health Questionnaire (CoPaQ).

12 Women's Refugee Council, Cox's Bazar, Bangladesh, Social isolation among adolescent Rohingya girls benchmark survey.

13 LAC Interagency Task Team on Youth, UN Survey on Youth in LAC within the context of the COVID-19 pandemic.

## YOUTH ENGAGEMENT AND SOCIAL COHESION

In the past month, have you attended an association, trade union or political meeting? (Y/N)<sup>14</sup>

Have you been involved in any of the following actions in response to COVID-19? (No, Yes I have volunteered in person, Yes I have volunteered online, Yes I have donated money towards a COVID-19 response initiative, Other (specify)). If yes, in what field did you volunteer? (My own initiative, In my community, Through a civil society organization, Through a national initiative, Through a business/firm, Through a religious organisation, Through an academic organisation, Other (specify))<sup>15</sup>

Over the past 14 days, I have the feeling that,

- There is greater solidarity and cohesion in our society
  - Strongly agree, Agree, Disagree, Strongly disagree
- I am an integral part of my community
  - Strongly agree, Agree, Disagree, Strongly disagree
- My nation is growing closer together
  - Strongly agree, Agree, Disagree,

Strongly disagree

- There is less solidarity and cohesion in my society (i.e. hoarding essential supplies, corona parties, refusals to physically distance, etc.)
  - Strongly agree, Agree, Disagree, Strongly disagree
- I am not an integral part of my community
  - Strongly agree, Agree, Disagree, Strongly disagree
- The crisis has divided my nation
  - Strongly agree, Agree, Disagree, Strongly disagree<sup>16</sup>

## SAFETY AND PROTECTION, INCLUDING HARMFUL PRACTICES

*Do not include direct questions to participants about their experiences of gender-based violence (GBV) if the survey is delivered to participants quarantined at home – it is unlikely that participants can be interviewed separately, confidentially and privately in this context. These questions may harm participants and any results will be unreliable because enumerators will not have had sufficient time to build up rapport with participants to ask sensitive questions. Questions around GBV and harmful practices are generally excluded from rapid assessments; furthermore, assessments around GBV are not required before putting services in place. Instead of assessments, it may be useful to conduct service mappings looking at services available to young people in conjunction with services accessed by young people.*

- What kinds of items would help you to move around more freely and spend time outside your shelter?
- Are there items that you need to help you stay safe or access information, aid and services?

<sup>14</sup> UN-Women, Survey on GBV in Rwanda.

<sup>15</sup> LAC Interagency Task Team on Youth, UN Survey on Youth in LAC within the context of the COVID-19 pandemic.

<sup>16</sup> Ludwig Maximilian University Munich (Germany) and University of Oxford (UK), The COVID-19 Pandemic Mental Health Questionnaire (CoPaQ).

*After lockdowns have lifted and teams are able to safely visit homes to conduct interviews, the following resources, questionnaires and sample surveys may be of use.*

- UNICEF, [Ethical Considerations for Evidence Generation Involving Children on the COVID-19 Pandemic](#)
- Reproductive Health Response in Conflict (RHRC) Consortium, UNHCR, UNFPA, Center for Health and Gender Equity and WHO, [Gender-based Violence Tools Manual – For Assessment & Program Design, Monitoring & Evaluation in Conflict-Affected Settings](#)
- UNFPA APRO, UN-Women, WHO, Q&A and decision tree on VAW/GBV questions related to COVID-19 (to be released July 2020)
- WHO, Program for Appropriate Technology in Health (PATH), [Researching Violence against Women: A Practical Guide for Researchers and Activists](#)
- Population Council, Bangladesh, [COVID-19-related knowledge, attitudes, and practices among adolescent girls](#)
- UN-Women, [Baseline Survey on Sexual and Gender Based Violence in Rwanda](#)

## CSE

Since the start of the pandemic, from what sources have you received information about puberty, sexual and reproductive systems, information about contraceptives or STIs?<sup>17</sup>

Some schools have classes on puberty, on sexual and reproductive systems, and on relationships between boys and girls. Did you ever attend classes on any of these topics? Do you attend classes on any of these topics in the context of lockdown?<sup>18</sup>

Have you faced any challenges in accessing information or education about your sexual and reproductive health since the outbreak of COVID-19 in your country? If so, please provide more information.<sup>19</sup>

17 UNFPA EECA, Youth and COVID-19 Assessment.

18 WHO, [Illustrative Questionnaire for Interview Surveys with Young People](#).

19 UNFPA ESARO, Restless Development, UNAIDS, AfriYAN and UNESCO, 'Have your say!' Survey.

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