



AFPPD Central Asian Delegation

Study Tour

Estonian Youth Sexual and Reproductive Health Policy

Dates: 1– 3 December 2016

City, Country: Tallinn, Estonia

Hosting organization: Estonian Sexual Health Association (ESHA); www.amor.ee

Participants: 12 participants, including Members of Parliament (MPs), parliamentary staff, CSOs representatives and AFPPD staff

Background:

A growing number of middle-income countries are scaling up youth-friendly sexual and reproductive health pilot projects to national level programmes. Yet, there are few case studies on successful national level scale-up of such programmes. Estonia is an excellent example of the scale-up of a small grassroots adolescent sexual and reproductive health (SRH) initiative to a national programme, which contributed to improved adolescent sexual and reproductive health outcomes. Main contributing factors to the successful scale-up of an adolescent SRH initiative in Estonia include: 1) favourable social and political climate; 2) clearly demonstrated needs for adolescent sexual and reproductive health services; 3) a national professional organization that advocated, coordinated and represented youth clinics; 4) enthusiasm and dedication of health professionals and other personnel; 5) acceptance by user organizations; and 6) sustainable funding through the national health insurance system.¹ It should be also noted that the measurement and recognition of the remarkable improvement in Estonia's adolescent SRH outcomes would not have been possible without the development of good reporting and monitoring systems.

During the study tour, participants will be able to learn from the organization that initiated the establishment of youth friendly clinics and life skills education in Estonia (ESHA). Parliamentarians will meet all current actors in contributing to the implementation of the Estonian youth sexual and reproductive health and rights (SRHR) policy, such as the Parliaments' Standing Committee on Social Affairs, the Ministry of Social Affairs, the Estonian Health Insurance Fund (financier of the services), the Health Board (license issuing authority), the National Institute for Health Development that provides data and conducts research, and the youth health and counselling centres.

Objectives:

(1) to share good practices of a comprehensive youth SRHR policy that includes scaling up youth-friendly clinics, developing comprehensive sexuality education curriculum, providing family planning services for young people, and collecting and monitoring data;

¹ The success factors of scaling-up Estonian sexual and reproductive health youth clinic network - from a grassroots initiative to a national programme 1991–2013, *Reproductive Health*, 2015 (<http://www.reproductive-health-journal.com/content/12/1/2>)



(2) to increase participating parliamentarians' capacity to legislate for the full achievement of gender equality and women's empowerment, universal access to SRH services, information and education, and specific needs of young people; and

(3) to expand the pool of parliamentarians who have sufficient knowledge to support the ICPD agenda.

Expected Outputs:

- Participants' increased understanding of contributing factors to better SRHR outcomes for young people;
- Participants' increased commitment to improving legislation and providing policy oversight enabling implementation of comprehensive youth SRHR policies in their countries;
- Development of specific amendments to the existing legislation, upon return to their countries, in order to enable young people to have broader access to SRHR services and information;
- Participants' increased commitment to advocating for the establishment of youth friendly clinics and providing compulsory comprehensive sexuality education in their countries;
- Participants' follow-up action plans to be created and shared with the AFPPD.

Draft Agenda

Wednesday, November 30	
09:00-21:00	Participants arriving in Tallinn
Thursday, December 1	
09:30-10:30	Welcome to the Estonian Sexual Health Association (ESHA) office
11:00-13:30	Visit to the National Institute for Health Development (<i>lunch will be offered</i>)
14:00-17:00	Visit to the West-Tallinn Central Hospital, Youth Counselling Center and Maternity Hospital
17:00-17:30	<i>Daily feedback and wrap-up</i>
Friday, December 2	
11:00-13:00	Visit to the Estonian Health Board to learn about issuing licenses
14:00-16:00	Visit to the Health Insurance Fund and Youth Counselling Centers
16:00-16:30	<i>Daily feedback and wrap-up</i>
Saturday, December 3	
10:00-11:30	ESHA, visit to a Sexual Health Clinic (comprehensive sexuality education to be discussed)
12:00-13:00	Visit to the Social Affairs Committee in the Riigikogu (the Estonian Parliament)
13:00-14:30	Excursion in Riigikogu and lunch
15:00-16:00	Social Ministry
16:00 -16:30	<i>Feedback on the study tour, evaluation and wrap-up</i>
19:00	Dinner
Sunday, December 4	
09:00	Departure



About organizations:

Estonian Sexual Health Association

Estonian Sexual Health Association (ESHA) is a non-profit organization promoting sexual and reproductive health for all people in Estonia. ESHA is a member association of the International Planned Parenthood Federation (IPPF). ESHA was established in 1994. It works to inform, educate, and provide health services and counselling to young people. The organization works directly with youth (under age of 25), as well as with health service providers. ESHA coordinates the network of youth friendly clinics and counselling centres.

The National Institute for Health Development

The National Institute for Health Development (NIHD) is a government-funded research and development body. NIHD's mission is to establish and share health related knowledge as well as to influence health behaviours and determinants so as to increase the longevity and well-being of the Estonian people. NIHD administers national health statistics, by collecting, analysing, and providing health data and information of the Estonian population. In addition to health data management, NIHD develops and implements disease prevention programmes.

Estonian Health Board

The Estonian Health Board's vision states: *“By 2025, all Estonian people will be aware of the health and living environment that supports health. This will be achieved by the Health Board, the people and the sincere cooperation of different parties.”* The Estonian Health Board is the national license issuing authority to certify medical staff as well as to assess medical devices, drugs and cosmetic products, and water quality. It also acts as a Center for Disease Control, being responsible for surveillance, prevention, and epidemiological risk analysis.

Estonian Health Insurance Fund

The Estonian Health Insurance Fund (EHIF), operates the national mandatory health insurance scheme and performs some quality assurance activities. The national health insurance scheme covers approximately 95% of the population with a broad range of curative and preventive services as well as some monetary benefits. Revenues stem primarily from earnings-based employer and employee contributions, in addition to state contributions for certain population groups.

Riigikogu, Estonian Parliament

The Riigikogu (the Parliament of Estonia) is unicameral with 101 members serving four years, who are elected by a general election.. In addition to approving legislation and national budget, the Riigikogu appoints high officials, including the Prime Minister and Chief Justice of the Supreme Court, and elects the President (either alone or, if necessary, together with representatives of local government within a broader electoral college). The Riigikogu has 11 standing committees and 4 select committees. The Social Affairs Committee drafts legislation on labour, social welfare, social security and health care.

Estonian Ministry of Social Affairs

The Estonian Ministry of Social Affairs covers the areas of health, labour, social security, family and children, and gender equality. The Ministry operates in the field of social security, where it has set five strategic objectives: (1) to ensure people's economic prosperity and their good work; (2) to ensure people's social coping and development; (3) to support the well-being of children and families; (4) to promote people's mutual care, equal opportunities, and gender equality; (5) to ensure people's long and high-quality life.