

What's up with youth health & well-being in the WHO European Region?

Did you know one in three people in Europe and central Asia is under 30?

In the four central Asian countries (Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan) this share is even larger – every second person is under 30.

Many health and well-being challenges young people face are similar across the WHO European Region. Let's find out more and zoom in on what can be done.

Mental health

- The COVID-19 pandemic, the war in Ukraine and climate-related emergencies have placed enormous stress on people globally and across the WHO European Region, including young people. While most young people have coped well given the extraordinary changes in their freedoms and lifestyle, the number of young people experiencing mental health conditions, such as anxiety and depression, has increased significantly in the WHO European Region.
- The mental health impacts of COVID-19 and other recent events have particularly impacted young people who:
 - already experienced mental health problems before the pandemic;
 - are not in employment, education or training;
 - are from marginalized communities; and/or
 - have limited family and/or social support.

Did you know that mental health services are often difficult to access for young people?

- Many countries are struggling with long waiting lists for mental health services. On top of this, the services are often expensive, and their designs don't reflect the needs of young people. Far too often, there is very little information on where to look for help.

What can be done?

- It is on all of us to fight the stigma of mental health by talking about it, supporting those around us and seeking help when needed.
- Engaging and including young people in the design and delivery of mental health activities and interventions can help to ensure activities meet young people's needs and reach those who need them.



COVID-19

- For many young people, the COVID-19 pandemic was a shock to their normal lives. For weeks and even months, schools and universities were closed. Young people were isolated from their friends and networks.
- Many young people were infected with COVID-19. They were also affected physically and psychologically in the short- and long-term by COVID-19, including with what we now know as long COVID.



Did you know that not all young people eligible for the COVID-19 vaccine have received their first shot yet?

- Vaccine uptake, particularly among young people in low, lower-middle and upper-middle income countries remains relatively low.



What can be done?

- As today's changemakers and tomorrow's leaders, young people need to be engaged in health decision-making to build resilience for future health crises.
- To address low vaccine uptake among young people, decision makers should listen and respond to young people's concerns.
- Young people need to be included in efforts to protect communities through encouraging use of protective measures and empowering them to take decisions to protect themselves.

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Sexual and reproductive health

- Some countries in Europe & central Asia do not yet provide:
 - free sexual and reproductive health services to adolescents
 - access to contraception without parental consent
 - testing for sexually transmitted infections (STIs).



Did you know young people are particularly vulnerable to HIV?

- This is driven by poor sexuality education and lack of access to condoms.

What can be done?

- All adolescents should receive sexuality education, including information on access to services, contraception, consent and violence.
- Youth should have access to the most suitable contraceptives for them, full access to appropriate and confidential sexual and reproductive health care services, and the freedom to make informed decisions.



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