

ADOLESCENTS- ‘Survival, Development, Protection & Participation’

**POLICY FRAMEWORK FOR ADOLESCENTS
IN PAKISTAN**



RutgersWPF



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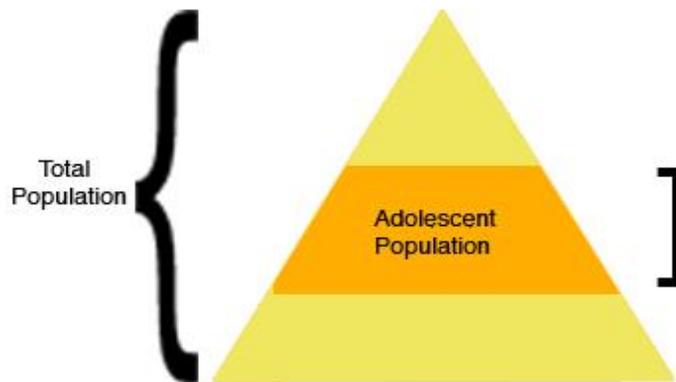
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ABBREVIATIONS

ARH	Adolescent Reproductive Health
AIDS	Acquired immune deficiency syndrome
HIV	Human immunodeficiency virus
PAP	Policy for Adolescent in Pakistan
PPP	Public Private Partnership
STI	Sexually transmitted infection
RH	Reproductive Health

Situational Analysis:

Pakistan is the sixth most populous country in the world and currently has one of the largest cohorts of young people in its history, with approximately 25 million people between the ages of 15 and 24 which is called the Youth. Beyond and below this bracket from 9 to 19 years of people are called adolescents. Currently a large portion of Pakistan's population, 39.5 million (2007-8) falls between the age brackets of 10-19 years.¹



The age bracket from 9 to 19 is most vulnerable years of a persons' life. A young person of this age is maturing physically, sexually, and psychologically.² How these years are spent and treated, determines the rest of an individual's life- So if they are not supported and guided we can lose a vibrant generation that could play a crucial role in future human development. A house with a strong foundation will eventually result in

These are the foundational years of our life. So like a house that doesn't have proper building blocks at the foundation, will not be able to remain erect- and instead will fall to the ground.

However if there is an economic and social investment, this age bracket also has the most potential to produce long-term, positive benefits for themselves, as future parents and the future of our nation tomorrow.

Numerous successful steps have been taken in the past by various ministries and the civil society to capitalize on the potential of young people in Pakistan. But, the policies and efforts have mainly been for young people beyond the age of 19, and in result, the adolescents of Pakistan have been neglected.

One of the main reasons for that is the lack of identifying them as a separate group that has their own specific needs and demands. To understand this vibrant group we first need to define them by age:

Adolescents have been further classified in the following groups:

¹ United Nations Development Programme, 2009.

² Rozan, 2009.

- Group 1: Age 9-13 (early adolescent)
- Group 2: Age 14-16 (high energy group)
- Group 3: Age 17-19 (late adolescents)

Adolescents must be thought of and treated as a distinct segment of the population with specific Developmental needs. This understanding must be shared and discussed with relevant public and nonpublic institutions (and all stakeholders) to work toward the development of a policy framework for adolescents.

Global Commitments

There are today more adolescents than at any time in history—a vibrant generation who will play a crucial role in future human development. The 1.2 billion people aged 10-19 make up about 20% of the global population (WHO). Globally many conventions and conferences have led to commitments by countries to work for the plight of adolescents, particularly their health. At the Global Consultation on Child and Adolescent Health and Development 2002, government leaders, health experts, NGO's and children's advocates committed themselves to a world where adolescents enjoy the highest possible level of health.³

Also, adolescent reproductive health rights and needs were placed on the international agenda for the first time by the International Conference on Population and Development (ICPD), Cairo, 1994. The ICPD recognized the specific sexual and reproductive health needs of young people beyond the “disease” and “procreation” perspective and focused on the overall health, SRH, rights, and well being of adolescents.

Many of the Millennium Development Goal targets directly relate to young people's health and development. Governments from all over the world met at the 2005 World Summit to reaffirm their resolve to achieve the Millennium Development Goals by 2015. The World Summit underscored the need for achieving universal access to reproductive health services by 2015, as set out in the ICPD.

Aim of Policy Framework:

The aim of the policy framework is to identify the broad areas and the issues within these that directly affect adolescents. It will also signal the need to address their issues through strategic action and research. Equal opportunities for development to all children during the period of growth should be our aim, for this would serve our larger purpose of reducing inequality and bring social justice.

But all this work needs a focus and a forum for planning and review, and proper coordination of the multiplicity of services striving to meet the needs of children.

³ World Health Organization, 2009.

And finally the proposed policy framework will be the document on which the ‘Policy for Adolescent in Pakistan’ (PAP) will be built on. A policy that enables them to protect, develop and encourage participation.

Objectives:

The end objective is to create an atmosphere to help adolescents realize their full potential. It is important to nurture adolescents during these formative years for sustainable affects on their lives that will lead to positive benefits in academic achievement, social and emotional adjustment, economic productivity, and responsible citizenship in line with basic human rights.

Overarching themes

In respect to adolescents its important to identify certain themes that are imperative to this working group and that also cut across all categories. It also informs the manner in which the issues will be treated:

1) Gender balance: equality equity and mainstreaming- It is obvious to many if not most, that Pakistan is predominantly a patriarchal society. In this case scenario, it is our ethical responsibility to promote gender equity in a society where women need not only mere representation but active participation and empowerment. Therefore gender balance should be inherently included in all modes of work both when drawing up the policy and during the process of implementation.

2) Strong leadership & commitment: when working with an impressionable group it is important to have sound leadership, every step of the way. An effective and committed leader enables children to grow strong healthy and become productive adults. To quote: “A great leader's courage to fulfill his/her vision comes from passion, not position.” So every individual involved in the formation of the policy must play the role of a committed leader to fulfill the vision of a better tomorrow for the adolescents of Pakistan.

1) Adolescents & Child Rights

Status:

Child rights are fundamental freedoms and the inherent rights of all human beings below the age of 19. These include right to life, health, nutrition name and nationality. To education, care, leisure, care and recreation. Protection from exploitation, abuse and neglect, right to expression, though, information and religion.

More than 30% of Pakistan’s population lives below the poverty line where basic needs, especially those of children, remain unfulfilled. Public sector institutions that can safeguard the rights of children are unable to because of mismanagement, bureaucracy and lack of funds. At the societal level, centuries-old traditions discriminate against women and girls, with long-term

consequences on maternal health, female literacy and lack of participation in decision-making. Poverty has created a criminal divide in the society where the plight of poor children goes unmourned.⁴

Children and especially female children are the most vulnerable section of our society and usually the silent sufferers.

Issues:

- 1) Lack of knowledge of basic rights
- 2) Lack of knowledge of Sexual and reproductive rights
- 3) Effective laws to protect children's basic rights do not exist
- 4) Existing adolescent specific programs are ineffective (such as child labour programs)
- 6) Lack of juvenile justice (including the increasing issue of corporal punishment)

Policies:

Pakistan has shown commitment for child rights, but so far it has been only on paper. Pakistan is the signatory of Pakistan ratified the UN Convention on the Rights of the Child and it entered into force on December 12, 1990.⁵ The constitution of Pakistan also states their support for child rights in the Constitution of Pakistan (chapter on rights).

The PAP needs to tackle current policies on rights of children (as well as other identified areas such as health, education etc.) by modifying or changing current policies or/and strongly **advocating the implementation of those laws through recommended implementation mechanisms.** Some identified policies (relevant to all the sections) include:

- 1) Anti terrorism Act
- 2) Juvenile Justice System Ordinance
- 3) Marriage laws
- 4) Population policy
- 5) The National Policy and Plan of Action (NPPA) (May 2000)
- 6) The Labour Policy, 2002
- 8) National Education Policy 1998-2010 and National Plan of Action for Education for All (EFA)
- 9) Draft National Health Policy 2009
- 10) National Drug Policy
- 11) National Health Policy
- 12) National Employment Policy

PAP needs to tackle the issues of the following marginalized groups of adolescents in context to **basic rights for children. It is strongly recommended that policies based on vulnerable group be gender based:**

⁴ Society for the Protection of the Rights of the Child, 2008.

⁵ UN Convention on the Rights of the Child, 2009.

- Children in Jail
- Orphans
 - Street children
 - Special children
 - Refugee children
 - Child soldiers.
- Children facing crisis- those suffering during man made or natural disasters
- Minorities

Programs:

The PAP must identify the current and existing programs being conducted by the public sector for advocating child rights in Pakistan. Existing programs should be further strengthened through initiatives to develop more awareness on child rights in Pakistan through reliable information:

Outreach Awareness Raising Programs:

Child Rights are the foundation of child protection- due to lack of both awareness and dissemination, most don't even know the very meaning of rights. In addition, adults also need to be sensitized to children's rights. For this purpose, outreach awareness raising campaigns on children's rights should be organized both to spread awareness and encourage parental guidance. Effective dissemination of information on child rights will happen once there is a collective effort from the three main sectors of our society. Namely, the media, civil society and the public sector

For rural areas: civil society and public sector (including registered madrassas and public sector schools, private schools), community influentials.

In urban areas: Media groups, civil society and public sector as well as high profile persons.

Programs for Recreation:

A big part of an adolescents life is recreation that unfortunately many Pakistani adolescents miss out (especially marginalized adolescent) because of various premature responsibilities. In a way, they lose an important part of their childhood. Every child has the right to recreation and enjoyment. They should be playing with building blocks instead of blocks for building. This is a fundamental point that needs to be addressed through a comprehensive strategy in the form of programs, in the policy. This programme must also include interactive programs between urban and rural children so as to work towards dispelling the 'village-city syndrome.'

2) Adolescents & Health:

Status:

Reproductive health, is a state of physical, mental, and social well-being in all matters relating to the reproductive system and functions at all stages of life. Reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when, and how often to do so.

In Pakistan early marriage and pregnancy, anaemia, sexual violence, and poor educational opportunities all contribute to ill health among female adolescents in this region. Adolescents, especially young women, are disproportionately affected by HIV infection worldwide; adolescence is also a time when vulnerabilities to injury, including motor vehicle crashes and suicide, as well as substance abuse, rise. In most parts of the world men bear the greater burden of violence and injuries; however, suicide among young women may be more common in South Asia than in other parts of the world. This, combined with the distressing practice of “dowry murder,” means that young South Asian women are at a particular risk from violence. The current demographic trend of a rapidly growing young population will increase the impact of adolescent health issues.⁶

Adolescents’ health is an extremely important and fundamental aspect of an adolescents life. There are many aspects within sexual and reproductive health, and nutrition concerning adolescents, that are critical to their survival and is imperative to a happy and most importantly healthy adolescent. It is important to note, however, that the onset of puberty, which may start earlier or later than age 10, is a developmental milestone critical to understanding the period of adolescence. The needs and realities of 10 year-olds and 19 year-olds are different, as the late adolescents are being entering practical life where they face issues of sexuality, and they cannot be encapsulated by an overarching concept of “adolescence.”⁷

Issues:

- Limited information available to adolescents
- Bias against adolescent (Age discrimination is one such major bias; it generates barriers to adolescents accessing awareness generation programs, health care facilities and reproductive health care.)
- Inability to obtain health services
- Access to livelihood opportunities
- Lack of safe water, proper food intake and household sanitation

Policies:

The PAP should combat issues that keep adolescent from living physically and in turn mentally healthy lives. Planners and policymakers need to recharacterize and address the needs of

⁶ Population Council, 2004.

⁷ Ayesha, 2003.

adolescents in Pakistan if they wish for the population to enjoy a future filled with possibilities.

The following aspects of health are necessary to address in PAP and to incorporate in the existing policies concerning health for adolescents:

- 1) Adolescent Reproductive Health (ARH)
- 2) Human immune-deficiency virus, (HIV) prevention
- 3) Taboos on sexuality (including counseling for psychological health)
- 4) Sexual violence /exploitation
- 5) Maturation and marriage
- 6) Sexually transmitted infection (STI)
- 7) Nutrition is an important factor of health. It deals with all the various factors of which food is composed and the way in which proper nourishment is brought about. The average nutritional requirements of groups of people are fixed and depend on such measurable characteristics such as age, sex, height, weight, degree of activity and rate of growth.

Women particularly become physically weak if their diet is not adequate- this problem can remain generational, if a mother remains malnourished. In the end it affects the entire life cycle from fetus to conception and then birth of a weak child and resultantly, a weak mother. If women's nutrition is not inculcated in the PAP, we are simply allowing the physical deterioration of the entire life cycle.

Programs:

PAP must identify existing public sector health programs being carried out. And the following initiatives should be included in PAP so that existing programs can be strengthened to become more effective.

- 1) Awareness- Adolescents must be given access to reliable information on reproductive biology and sex through various programmatic interventions. There should be interactive sessions with adolescents to teach them about health related issues. Issues such as menstruation, masturbation, and general sexuality are fraught with misconceptions and taboos. As a result, young people exhibit an anxiety level about their own sexual development and sexuality that is unhealthy and unnecessary.
- 2) Access to appropriate health care services
- 3) Advocacy (including responsible parenting and prevention of risky behaviour)
- 4) Counseling for adolescents on RH related issues
- 5) School based health education
- 6) Community based interventions
- 7) Health ministry should incorporate adolescent RH in medical textbooks/curriculum. It should also be considered as a field of specialization and thus a separate subject in the near future.

3) Adolescents & Education:

Status:

Education has an immense impact on human society- it is the knowledge gained through education that enables an individual to put his or her potential's to maximum use. An individual who cannot read or write in this day and age can be easily cut off from the rest of the world. The number of literate persons in a country, also judges the quality of human resource of a nation. More importantly, educating the girl child in Pakistan is of prime importance. It has been researched that if a women is educated, it is likely that her children will also follow suit- it means that her family will be more informed, healthier and happier. When girls go to school, they marry later and have fewer, healthier children. That is why educating females that comprise more than half of the population is a developmental imperative.

There is a wide gap in education between Pakistani boys and girls. Twice as many girls have no education (59 percent) compared with boys (31 percent). Similar gaps are found for middle and secondary education. However, primary education levels are closer; 18 percent of boys compared with 14 percent of girls have a primary education. Levels of education have been shown to exert a strong influence on adolescent fertility.⁸ In order to make accurate linkages between education, employment, and adolescent fertility and family planning, a clearer picture first needs to emerge of the issues they face with regard to schooling and work.

However, in this section we will be looking at the immediate changes needed to be included in the education sector for adolescents in Pakistan.

Issues:

Unfortunately, historically, Pakistan has underinvested in the public education sector, especially the primary level particularly for girls.

There are a number of factors that need to be considered in the policy when addressing the basic issues of primary schooling in the rural areas:

- 1) **Access-** Girls enrollment largely depends on how far the school is from their village. As parents are reluctant to allow girls to travel far from home. For boys this is less of a concern because most villages have at least one public school for boys.
- 2) **Type-** Public or private schools.
- 3) **Quality infrastructure/education-** The quality of the school is a variable strongly considered by parents at the time of enrolment.
 - Whether or not the teacher resides in the village as well as their level of qualification.
 - The need to reexamine the syllabi/curricula for improvement.
 - Infrastructure of schools needs massive improvement.

⁸ Ayesha, 2003.

4) **Abuse-** There is collective complaint about physical punishments both in the rural and urban schools. This is one of the main reasons for school drop outs.

Policies:

There is insufficient research on adolescents' educational experience in Pakistan. PAP should include research and in turn create initiatives to tackle:

- 1) Increase of enrollment in primary education
- 2) Reasons and implications for Drop outs
- 3) Ghost schools
- 4) Digital Divide
- 5) The nature of madrassas
- 6) Abuse and physical punishments in schools

PAP should also identify relevant policies to education, and incorporate the researched work and recommend policies for the well being of adolescents.

Programs:

Existing public sector programs should be identified in PAP and strengthened through the following initiatives.

Child Friendly Schools:

Initiatives should be taken to make schools more child friendly so that adolescents are encouraged to attend school and 'learn without fear.'

Distance Learning:

Distance learning is accessible to those who have mobility problems (handicapped, injured) and those who have family responsibilities. One of the immediate advantages of this type of learning is the narrowed gap of the digital divide.

It is also beneficial for those who want to learn at their own pace and gain more opportunities to study the most current material available.

The policy should look in to the various opportunities and chances to give distance learning as an option to adolescents (17-19 years) in rural areas. Why specifically later adolescents have been pinpointed for this program, is because of the responsibilities they carry mainly at this age, especially girls who have married early.

Counseling

The prime age of ambivalence and confusion sprouts most during the adolescent years- during these years decisions are hard to make because conditioned beliefs and values may conflict with real situations faced by perplexed youngsters.⁹

⁹ Rozan, 2009.

A youngster is bombarded with simultaneous changes, emotional, physical as well as changes at the cognitive level and it's a challenge to cope with all these changes simultaneously. In addition, circumstantial situations can add more confusion to the existing chaos. For many adolescents even choosing the right subject or figuring out where their strengths lie can be a life changing decision to make. In this common scenario it's important to have someone emotionally supportive and someone who can give proper guidance during these years.

PAP should include counseling as a necessary part of education in Pakistan as well as the need to institutionalize it.

Public Private Partnership:

The policy should strongly promote private public partnership in the sector of education. Some existing case studies show the massive improvement in primary schooling as a result of private public partnership. Effective interventions are needed to target well-defined needs with proven, well-implemented programs.

Raising awareness of the importance of education in the rural areas & addressing the digital divide:

More than anything- what is needed to convince parents and adults to send their children to school is, to create awareness about the advantages not only of education for children and especially, girls but also the benefits reaped by the family. There is a need to publicize education as an investment in human capital that yields future returns in the form of enhanced labor market earnings.

The policy should have campaign drives to encourage 'Education for Children' as part of its strategy on improving the literacy rate of Pakistan.

4) Adolescents & Livelihood: 'Guiding, Training, Facilitating & Placement'

Status:

It is usually circumstance that forces children to work. Broadly defined, livelihoods include the acquisition of skills to become economically productive, including economic literacy, access to savings, access to credit, and formal-sector employment.

According to a survey 3.3 million (8%) of 40 million children ages 5–14 were economically active and 73 percent of them were boys. However, figures will vary depending upon the terms used to define employment. An analysis reveals that 45 percent of adolescent girls in Pakistan are not in school, engaged in economically productive work, or married. The comparable figure for boys' ages 10–19 is only 13 percent. Many of the adolescent girls in this group are working in the parental home, but it is unclear if this time is accounted for and what both boys and girls

are doing in addition to this. Almost one-half of working adolescents (48%) do agricultural work.¹⁰

Heavy responsibilities of 'earning' or the burden of 'feeding another mouth' robs a child of their most important years- the years where they meant to learn and grow in an environment that enables them to understand themselves and their role in society.

Issues:

- Unsafe working environment for children (including exploitation and abuse)
- Current opportunities available for young people, appears to reinforce traditional gender role stereotypes.
- Lack of understanding between the connection of education (also vocational training) and employment i.e. enhances labour market earnings.
- Lack of employment opportunities
- Lack of laws that protect working children

Policies:

One of the identified policies for livelihood, 'The National Employment Policy' has included children under a very short section of 'Vulnerable Workers'.¹¹ This part needs to be enhanced by PAP to include policies that protect as well as enable the creation of alternative opportunities for adolescents working in unsafe environments:

- Policies protecting working children (including environment, pay (especially working girls) and timings)
- Legal age for working children
- Incorporating education with employment
- Skill development programs that target the following tiers:
 - National job market (coastal, agriculture, industrial, commercial (including arts and crafts), urban, rural)
 - International job market

Other relevant policies also need to be identified by PAP for improvement.

Programs:

Existing programs should include the following income generation prospects. These programs can also be implemented independent of existing programs.

- Skill development: Target oriented programs for new and enhancement of existing skills that fulfill the demands of both the national and international markets.
- Entrepreneurships
- Vocational Training

¹⁰ Ayesha, 2003.

¹¹ National Employment Policy of Pakistan.

- Micro Finance
- Internships
- Job counseling
- Facilitating job placements

5) Adolescents in Crisis

Status:

Since the time of partition, Pakistan has seen both man made and natural disaster with frequency. In our short history of 62 years we have experienced a dozen of serious crisis –During a situation of crisis whether it is man made or natural children, and females are the most dangerously vulnerable section of the affected population.

They face abuse, sexual exploitation and many other ills borne out of their vulnerability and the lack of their protection. They face all kinds of traumas and whether adolescents are pursuing academic or employment goals – their lifelong plans are disrupted to the core.

There needs to be advanced preparation and a policy that deals with the problems faced by adolescents during and after crisis. Adolescents who are on the verge of being productive suffer at a time of crisis and in turn so does the nation. There needs to be an in- built policy of how to deal with their problems. **A National Children’s Crisis Board should be constituted to provide this focus and to ensure at different levels continuous research, planning, review and coordination of all the essential services.**

Issues:

- Effect of disasters on working adolescent
- Academic disruption of school going adolescent
- Health related issues borne out of disasters
- Extreme vulnerability to all kinds of abuse , especially special children(trafficking, sexual abuse etc)
- Lack of recreation

Policies:

Adolescents are usually the most vulnerable portion of the population and a disaster increases their vulnerability and thus open opportunities for adults to exploit their weakness and inability to defend themselves.

The policies for adolescent in crisis should focus on gender based issues respective to all the identified issues mentioned above. There is a need to create a policy to protect all those adolescent suffering in man made or natural disasters. The policy for adolescents in crisis should include:

- Disaster Preparedness
- Policies based on the distinction between Long term and Short term exposure to disasters

- Needs based assessment
- Gender based identification of issues

Programs:

- Provision of basic needs (including health related needs)
- Trauma counseling
- Mobile schools
- Recreational opportunities

Implementation Strategy

1) Inclusion of Adolescent’s voice in the Policy: To create a policy that sincerely protects and helps a child develop, should involve adolescents from varied backgrounds representative of Pakistan’s multifarious society. This would require effort and patience- but the outcome of their involvement would prove priceless and effective. There is no point of exclusively sitting adults to draw up a policy that doesn’t include the voice of children. Therefore, the view of adolescents in the form of the ‘working group’ should be consulted every step of the way in achieving a PAP in Pakistan.

2) Public Private Partnerships: The magnitude of the challenges and the considerable up-front costs of doing things right suggest that shared responsibility through public-private sector partnerships offers greater promise than either public sector or voluntary action alone—and both will benefit greatly in the long term.

3) Inter ministerial collaboration: This is perhaps as important as PPP. Ministries involved in the project should work together to prevent over expenditure due to overlapping costs and more importantly, pooling in expertise of different departments for consolidated outcomes with pre designed **roles and responsibilities** with accountability.

4) Awareness raising campaigns: Before exercising the activities and programs adolescents and adults alike, need to be aware of their basic rights. It’s only after understanding the advantages of ‘new’ techniques will people be more forthcoming and open to the idea of adopting these practices in their lives. In order to achieve that mind set, awareness-raising campaigns need to be organized on a very regular basis both in the rural and urban areas. Campaigns should ideally be creative in nature and not run of the mill lectures that go in through one ear and out the other. Ideally, they should be interactive so that information is retained through infotainment. In order to make awareness raising campaigns even more effective- there should be a strong atmosphere of adolescent volunteerism. This will give adolescents the feeling of ownership and it will inculcate a sense of volunteerism among them.

5) Strengthening Existing Policies and Public Sector Programs by giving it an ‘Adolescent’ context: Many programs and policies have been made by the public sector to develop young people, but either the plans are left on paper or it is not adolescent specific.

The PAP should identify the relevant policies and programs that have potential to be effective for the development of adolescents in Pakistan. Relevant policies should be given suggestions and recommendations to make it more adolescent friendly and relevant programmes should either include or be entirely adolescent specific.

Drafting- Legislating-Implementing

- 1) **Drafting:** of the policy should begin immediately after the policy framework has been approved. The time frame for drawing up the 'Policy for Adolescent in Pakistan': One month and 15 days.
- 2) **Legislating:** Time frame for legislation of the policy: Not more than six months.
- 3) **Implementing:** Implementation should begin the same year it is legislated and the goals should be foreseeable in the first five years since implementation.

REFERENCES:

(2008). Child Rights. Retrieved May 27, 2009, from Society for the Protection of the Rights of the Child Web site: http://www.sparcpk.org/crs_child_rights.php

Khan, Ayesha (2003). Adolescent and Youth Reproductive Health in Pakistan. Retrieved May 27, 2009, Web site: http://www.policyproject.com/pubs/countryreports/ARH_Pakistan.pdf

(2004). Role of gender in health disparity: the South Asian context . Retrieved May 27, 2009, from Population Council- Research that makes a difference Web site: <http://www.popcouncil.org/publications/articles/823.html>

(2009). Youth Helpline. Retrieved May 25, 2009, from Rozan.org Web site: <http://rozan.org/content/view/122/45/>

(2005). National Legislation and Policies Against Child Labour in Pakistan. Retrieved May 22, 2009, from International Labour Organization Web site: <http://www.ilo.org/public/english/region/asro/newdelhi/ipec/responses/pakistan/national.htm>

(2008). Policy Framework. Retrieved May 24, 2009, from Policy Framework for Services Web site: http://www.child.gov.ab.ca/home/documents/ministry/User-Friendly_Policy_Framework1.pdf

(2007). Policy . Retrieved May 24, 2009, from Sex and Relationships Education policy for Newtown Web site: <http://www.newtown.devon.sch.uk/docs/policies/sexandrelationship.pdf>

(2007). Overview Background. Retrieved May 24, 2009, from Pakistan Unicef Web site: <http://www.unicef.org/pakistan/overview.html>

(2009). What is Reproductive Health?. Retrieved May 27, 2009, from Wisconsin Alliance for Women's Health Web site: <http://www.wiawh.org/resourcecenter/informationclearinghouse/whatish.aspx>

(2009). Nutrition. Retrieved May 27, 2009, from guruguide.com Web site: <http://www.eguruguide.com/>

(2007). Education in Pakistan: The Key Issues, Problems and The . Retrieved May 22, 2009, from Education in Pakistan Web site: http://www.biztek.edu.pk/downloads/research/jmss_v3_n1/5%20EDUCATION%20IN%20PAKISTAN.pdf

(2009). Pakistan: Educational Opportunities in Rural Areas. Retrieved May 22, 2009, from Population Council- Research that makes a difference Web site: http://www.popcouncil.org/projects/TA_PakEducationRural.html

(2009). Population Council- research that makes a difference. Retrieved May 22, 2009, from Transition to Adulthood- Livelihood Web site: <http://www.popcouncil.org/ta/livelihoods.html>

(2003). Rights of the Child in Pakistan. Retrieved May 22, 2009, from World Organization Against Torture Web site: http://www.omct.org/pdf/cc/pakistan_report_09_2003_EN.pdf

(2009). 2008:Human Rights Report Pakistan. Retrieved May 22, 2009, from US Department of State- Diplomacy in Action Web site: <http://www.state.gov/g/drl/rls/hrrpt/2008/sca/119139.htm>