

THE INSTITUTE OF SOCIAL STUDIES UNDER THE CABINET OF MINISTERS OF UZBEKISTAN

REPORT PROMOTING HEALTHY LIFESTYLE AND REPRODUCTIVE HEALTH OF THE YOUTH IN UZBEKISTAN



TASHKENT - 2017

WORKING GROUP OF RESEARCHERS

Team Leader:

Isakulov Shuhrat, PhD in Economics

Experts:

Tursun Akhmedov, Doctorate in Economics Ilkhamova, Zumrad

Contributors / Members of the Working Group:

Krasutskiy Georgiy Sobirova Ozoda Ibragimova Nargiza

The study was conducted by the Institute of Social Studies under the Cabinet of Ministers of Uzbekistan with financial and technical support of UNFPA, United Nations Population Fund in Uzbekistan.

© The Institute of Social Studies under the Cabinet of Ministers of Uzbekistan

All rights reserved by the Institute of Social Studies under the Cabinet of Ministers of Uzbekistan. Any reproduction of the report or use of quotes from the publication requires written consent. Reference to the source is required. With all questions related to publication, translation, and acquisition of hard copies, please, refer to the following address: №27 Khadra square, C-14, Tashkent, 100011, Uzbekistan,

Tel. +99871 2446890, Fax: 239-14-18 <u>www.isr.uz</u> e-mail: <u>institute@isr.uz</u>

Current state of familial - matrimonial relations as well as promoting reproductive health of population is an essential component sociodemographic of development of the country, which in many respects defines the level of development of the society. Without reliable and quality information on reproductive health of population, review of transformation of family values, trends in the changing national traditions and values, it is impossible to conduct effective socioeconomic and demographic policies.

It is common knowledge that statistical reporting data do not enable to identify to full extent the place of health and healthy lifestyle in the system and scale of the values children and their parents, obtain information on existing problems and challenges, both objective, and subjective ones, which hinders the promotion of healthy lifestyle and engagement of the youth in sports. The report being offered for your attention is the outcome of the sociological survey of the youth aged 18-19, the graduates of vocational colleges and academic lyceums of the country, conducted in 2017.

Findings of this study can be helpful in developing specific activities of government's youth policy, in nurturing the health of the youth as well strengthening of reproductive health of population in Uzbekistan.

The team of contributors express their appreciation to the leadership of the United Nations Population Fund in Uzbekistan for assistance in conducting the study. Special thanks go to the UNFPA staff, namely Fuad Aliev, Gulchehra Zakirova, Bobur Juraev, Nigora Aykhojaeva, who regularly provided invaluable advisory and organizational support in conducting of the study and in preparation of the analytical report.

We express our gratitude to the leadership of the Ministry of Higher and Secondary Special Education, the Ministry of Health and everyone, who provided organizational support in conducting this study.

Director, Institute of Social Studies under the Cabinet of Ministers of Uzbekistan, Tursun Akhmedov PhD

ACRONYMS

| ISI of CMU | Institute of Social Studies under the Cabinet of Ministers of Uzbekistan | | | | |
|--------------------|--|--|--|--|--|
| Women's | Women's Committee of Uzbekistan | | | | |
| Committee | | | | | |
| UNFPA | United Nations Population Fund in Uzbekistan | | | | |
| UN | United Nations | | | | |
| WHO | World Health Organization | | | | |
| Ministry of Health | Ministry of Health of Uzbekistan | | | | |
| CSSVE | Center for Secondary Special Vocational Education of Uzbekistan | | | | |
| MHSSE | Ministry of Higher and Secondary Special Education of Uzbekistan | | | | |
| НН | Households | | | | |
| STIs | Sexually transmitted infections | | | | |
| STDs | Sexually transmitted diseases | | | | |
| HIV | Human Immune Deficiency Virus | | | | |
| AIDS | Acquired Immune Deficiency Syndrome | | | | |
| MIA | Ministry of Internal Affairs of Uzbekistan | | | | |
| Khokimiyat | Administrations of local authorities | | | | |
| RMUs | Rayon Medical Unions | | | | |
| VRO | Vital Registration Office | | | | |

CONTENTS

| INTRODUCTION | 6 |
|---|----|
| Research Methodology | 9 |
| Chapter 1. STATE STRATEGY IN THE AREA OF YOUTH POLICY, SPORTS AND HEALTH | |
| 1.1. Key Strategic Priority of Youth Policy | 12 |
| 1.2. Youth at the Modern stage of Development, National Traditions and Values in Uzbekistan | 15 |
| 1.3. Measures in the area of Promoting Healthy Lifestyle of the Youth | 18 |
| Chapter 2. HEALTHY LIFESTYLE AND ISSUES RELATED TO SAFEGUARDING THE HEALTH OF THE YOUTH | |
| 2.1. Awareness of Healthy Lifestyle and Daily Regimen (routine) | 21 |
| 2.2. Role of Sports, Recreational and Cultural Activities in the Life of the Youth | 26 |
| 2.3. Behavioral Models of the Youth in the Society | 34 |
| Chapter 3. REPRODUCTIVE HEALTH OF THE YOUTH AND PREPAREDNESS TO FAMILY LIFE | |
| 3.1. Awareness of Reproductive Health and Sex Education of the Youth | 38 |
| 3.2. Awareness of HIV/AIDS and STDs, Risks of Infection and Means of protection | 47 |
| 3.3. Attitude of the youth to early marriages and creating a healthy family | 53 |
| 3.4. Awareness and level of preparedness of the youth to family life | 57 |
| CONCLUSIONS AND PROPOSALS | 67 |
| ANNEXES | 72 |

INTRODUCTION

Lifestyle of young people and their reproductive health gains special significance. Current state of their health, quality of the acquired education, realization of personal potential depends on the success of generating and reinforcing the skills of healthy lifestyle and reproductive health in their minds. Safeguarding the reproductive health of teenagers and the youth has immense social significance. Current state of reproductive health of the youth entering the fertile age will directly influence the demographic processes, and the trends in the demographic situation will unfold significantly depends on notions of family-marital relations, sexual behavior, as well as reproductive orientations of modern of teenagers.

The level of human health depends on many factors, i.e. congenital, socioeconomic, environmental as well as performance of the healthcare system. However, it is the person himself, his lifestyle and values, orientation, degree of harmonization of the inner world and relationship with the surrounding have the primary role in safeguarding and nurturing own health. To this end, strengthening and safeguarding health should become the need and responsibility of everyone.

Annual working plan (AWP) for 2017 of United Nations Development Assistance

Framework (UNDAF) approved правительством of the country предусмотрена to be held in study on the issues of promoting of healthy lifestyle and safeguarding reproductive health of young people in Uzbekistan. This study is planned to be held in close collaboration with the Ministry of Health and Women's Committee of Uzbekistan.



Improving accessibility of quality information on current state of public health, primarily of the young generation remains as the relevent issue. Implementation of successful policies in healthcare, education, physical training and sports is quite difficult without knowledge of the attitudes of the young generation to own health, family values, understanding the importance of healthy lifestyle, and access to physical education and sports.

At the same time, It is known that statistical reporting data do not enable fully identify role of health and healthy lifestyle in the system and scale of the values of children and their parents, obtain information on existing problems and challenges, both objective and subjective, which hinder promotion of healthy lifestyle and engagement of the youth in sports. This information can only be collected only by conducting sociological studies among various groups in the society.

Furthermore, conducting this study based on survey of the youth is in line with government programme "Year of Dialogue with People and Human Interests" with regard to effective implementation of government's youth policy, improvement of the system of social protection of population, improving health of the residents and primarily of the youth.

In the Decree on Approval of the Strategy of Actions in Five Prioritized Dimensions of Development of Uzbekistan in 2017-2021 of the President of Uzbekistan issued on February 7, 2017, the subject of promoting healthy lifestyle and safeguarding reproductive health of the youth is amongst development priorities of the country. Inter alia, priority dimensions of development of social sector envisage specific Measures for improvement of the system of social protection and health of population, enhancing sociopolitical activeness of women, strengthening the families,

preparedness of the youth to marriage, safeguarding health and enhancing socieconomic activeness, etc.

To this end, conducting this sociological study enabled to obtain quite broad information on the issues of promoting healthy lifestyle and safeguarding reproductive health of the youth in Uzbekistan that will serve as the basis for making additional management decisions.

This report was prepared based on the findings of the study. Main conclusions and recommendations of the report were discussed in the framework of roundtable with involvement

of scientists and experts of respective ministries, agencies and various organizations. Based on the findings of roundtable, practical proposals were fine-tuned and final report was prepared.

The prepared report on the findings of the study was forwarded for practical use to the Cabinet of Ministers of Uzbekistan, Ministry of Health, Ministry of the Economy, Women's Committee of Uzbekistan, Ministry Higher and Secondary Special education, National TV&Radio Company, Mahalla Foundation and other stakeholder ministries, agencies and organizations.



Based on the main obtained findings of the study, academic and popular articles were published in the science journals and websites for coverage among general public.

Use of of the findings of the study in practice

Findings of the studies enabled to analyze current problems of the youth in the area of promoting ohealthy lifestyle, reproductive health, identify factors of preparedness of the youth to future family life, identify positive and negative factors and causes, which have an impact on educational process, in future influencing the strengthening of family and health of the family members.

Findings of this study can be used in formulation of strategies and programs focused on:

- change in the curricula for working with the youth in the surveys strengthening health of the youth, proper daily routine and leisure, strengthening reproductive health;
- development of the activities to mitigate the causes and factors of sexually transmitted diseases among of the youth,
- preparation of the range of activities focused on strengthening and safeguarding health of the youth and women;

RESEARCH METHODOLOGY

Goal of the study: Assessment of current situation to promote healthy lifestyle and reproductive health of the youth, with subsequent development of evidence-based priorities of reforms in this sector.

Research Methodology: survey of the graduates of vocational colleges and lyceums in the regions of Uzbekistan using specifically developed questionnaire focused on review of the issues of attitudes of the youth to healthy lifestyle and reproductive health, identification of risk factors, their impact on the health of the youth.

Objectives of the study:

- review and summary of domestic practice of the studies of healthy lifestyle and reproductive health of the youth;
 - to be held in fieldwork of the sociological study to collect data;
 - analysis of existence of problems of early marriages among of the youth;
- identification of the level and effectiveness of sexual and reproductive education of the youth at vocational colleges and lyceums;
 - identification of traditional mentality and life views of the youth about the future;
 - review of the attitudes of the youth to family values and subsequent employment;
 - analysis of the readiness of the youth to family life;
 - awareness of the youth on healthy lifestyle and practice thereof;
- development of evidence-based and practical proposals to promote improvement of the reproductive health and social activeness of the youth.

Information base of the study: the data of the State Statistics Committee of Uzbekistan, information of research centers, findings of the research projects on reproductive health, conducted by the ISI in 2010-16, inter alia jointly with UNFPA, findings of the fieldwork to collect primary data by sociological survey/questionnaires.

Geography of the study: Survey was conducted by the in four regions of Uzbekistan: Tashkent, Surkhandarya, Andijan and Tashkent oblasts, by random sampling of lyceums and vocational colleges in urban (50%) and rural areas (50%).

Research Methodology: Anonymous survey of the youth (boys 47% and girls 53%), students vocational colleges and lyceums at the age of 18-19 was conducted. In total, 1,200 third-year students of vocational colleges and lyceums in 4 regions of the country were surveyed, on average 300 questionnaires in each region of the study. On average, 4 – 5 academic institutions were covered in each region. In total, 14 colleges and 4 lyceums were surveyed that amounted to approximately 1% of total number of academic institutions nationwide. Level of coverage is approximately 0.24% of the youth (graduates 3rd year of colleges and lyceums) nationwide. Sampling method – quotas, proportional at the stage of selecting controlled characteristics (gender, academic institution), random at the stage of selection of respondents. Collection of the data is done directly on the ground at the survey, using specifically developed questionнику. Questionnaire consists of 60 questions, grouped into 4 sections.

In the research process, qualitative method was also used by interviewing college teachers as well as the persons well aware of the problems of the youth in the surveys of healthy lifestyle and reproductive health in the regions. Personal interviews were held with the respondents in the form of express survey, and their opinions, proposals, and recommendations on the issues related to the subject of the study were recorded. Obtained findings of in-depth interview and surveys were included in the respective sections of the analytical report.



Questionnaire of the study. Questionnaire included open-ended and closed-ended questions on different aspects of the study. With consideration of goals and objectives of the study, questionnaire was developed consisting of 4 sections:

- Lifestyle contains questions to identify level of knowledge and practices of healthy lifestyle, proper daily routine, nutrition, self-assessment of the current state of health, physical exercises and sports, regular means and methods to support health, sources and channels of information on rational nutrition, plans of the youth for the future;
- «Reproductive Health» contains questions to identify awareness of the youth on reproductive health, on existing and desirable sources and channels of information on reproductive health, attitudes of the youth to the length and content of the classes on reproductive health, extent of satisfaction with texbooks and learning materials, awareness of drug use problems, causes of infection with STIs and their consequences, awareness of the youth on the methods of protection from unwanted pregnancy, etc.;
- «Attitude to marriage» this section of questions in the questionnaire enabled to analyze degree of the readiness of the youth to future family life, identify optimal age of men and women to enter marriage, identify most important sources of information for preparedness of the youth to enter marriage, attitudes to early marriages, birth of children, identify knowledge on factors and causes of divorces in young families, etc.;
- «Sociodemographic characteristics» contains issues on gender and age characteristics of the respondent, status and living conditions of the youth at the moment, level of education and sector where the parents of respondents are employed, self-assessment of the level of well-being of the family.

Questionnaire of the sociological survey was preliminarily pilot-tested at a vocational college and academic lyceums of Tashkent before scaling-up in order to identify existing mismatches and exclusion of future statistical and methodological problems in the process of main fieldwork.

Processing and analysis of the findings of the of the study

After the fieldworks database was generated using CSPro 4.1 as the software for data entry as well as SPSS statistics-v.24 for subsequent processing of the obtained data. Entered information was preliminarily analysed against contradictions and its corrections as well as to «clean» the database, build crosstabulations across various parameters of the survey and the data.

Analysis of the findings obtained in the surveys was done according to the rules and procedures, adopted in applied sociology. After computerized data processing output tables were received, characterizing and summarizing the quantitative and qualitative indicators of the findings from the answers of respondents.

Chapter 1. STATE STRATEGY IN THE AREA OF YOUTH POLICY, SPORTS AND HEALTH

1.1. Key Strategic Priority of Youth Policy

Shavkat Mirziyoyev, the President of Uzbekistan, speaking at the 72nd session of the UN General Assembly on September 19, 2017, proposed to develop International Convention on the Rights of the Youth under the auspices of the Untied Nations, as the uniform international legal instrument focused on formulation and implementation of youth-focused policies in the context of globalization and rapid development of ICT technologies.

The report declares *Tomorrow*, *well-being of the planet depend on what people our children will grow up to be*. Our key objective is to facilitate self-realization of the youth and erect barriers on the way of dissemination of the «virus» of violent ideology. We beliebe that this requires promotion of multilateral cooperation in social suppor fort young generation, protection of its rights and interests".

Youth policy is a priority area in Uzbekistan and focused on creation of socioeconomic, legal, organizational context and guarantees for social growth and development of the youth, unfolding its creative potential in the interests of enitre society¹. State Youth policy in the country is based on the following principles².

- caring for the youth regardless of national, racial, linguistic, religious affiliation, social status, gender, education and political beliefs:



- legal and social protection of the youth;
- succession of national, cultural traditions, spiritual connection of generations;
- support for youth initiatives, guarantee of the freedom of choice for the youth for realization their interests;
- direct participation of the youth in formulation and implementation of the policies and programs for development of the society, particularly, related to the life of the Uzbek youth;
- uniformity of the rights and responsibilities, freedoms and civil liability.

Broad social guarantees are granted to the youth by legislation including:

- free health services;
- free education;
- attendance of sports and cultural facilities on preferential terms;
- preferential loans for home construction, acquisition of household belongings;
- right for first employment or financial compensation according to current legislation;
- consideration of the needs of the youth in the design and construction of social infrastructure sites;
 - transportation benefits for students and underage young citizens;
 - compensation payments to underage citizens.

¹ «Strategy of Actions in Five Priority Areas of Development of Uzbekistan in 2017-2021 (Section on Improving Youth Policy, Decree of the President of Uzbekistan issued on February 7, 2017.

² Law of Uzbekistan on Foundation of Government's Youth Policy in Uzbekistan», № 429-XII passed on November 20, 1991.

Furthermore, there are special measures of social protection of minors, some categories of young citizens (persons with disabilities, housewives, children at orphanages, students, demobilized servicemen, army reserve, etc.).

Government defines as its priorities to promote social, economic, political and other rights and interests, accessible and quality education of the youth, support its physical, intellectual and moral development, facilitating employment and занятости, education in the spirit of respect for laws, national and universal values, protection from actions, which undermine moral values, and shielding from radicalism, violence, and cruelty, support for talented youth and young families, nurturing their healthy lifestyle, development of youth sports, etc.

The Decree on Strategy of Actions in Five Priority Areas of Development of Uzbekistan in 2017-2021 of the President of Uzbekistan issued on February 2017 identifies promotion of healthy lifestyle and safeguarding reproductive health of the youth amongst development priorities of the country. According to the strategies, коренным образом изменена legislative and organizational basis of youth policies.

Creating the basis of healthy lifestyle starting early years, caring attitude to own health for whole life is the foundation for human existence. Health of the students is a priority dimension of development of educational system. Teen years is the period of significant changes physical, psychological, and social aspects of behavior and lifestyle. One of factors of healthy lifestyle is rational nutrition.

Graduates of vocational colleges and academic lyceums of the country need to make important decisions, which determine their enitre life: choice of profession and own place in life, choice of the essence of life, forging world views, creating a family and giving birth to children. To this end, it is instrumental to know orientation in life and significant values of the modern youth - because this defines how they will build the future.

Every young person is an individual, who has particular attitude to the surrounding people, phenomena, objects, certain behavior in different life situations. Thus, all data obtained in the

framework of this study enable to create the image of young generation and determine their priorities and goals henceforth.

In the country starting 2017 new state programme was designed and is being implemented with the focus on facilitating, enabling social assistance of the youth, protect human dignity, specific economic, political, sociocultural interests of young people, providing assistance in employement of the youth based on the principles of voluntary choice. Special units for the youth



affairs were established at government agencies, including Ministry of Internal Affairs, Ministry of Health, Ministry of Education, khokimiyats.

Notably, not in all CIS countries such comprehensive and systemic efforts for working with the youth and engaging them in the political life has been streamlined. Strategic dimension of youth policies were define, which is being successfuly implemented for further promotion of social, economic, political and other rights and interests of the youth.

1.2. Youth at the Modern Stage of Development, National Traditions and Values in Uzbekistan

Population of Uzbekistan as of January 1, 2017, according to the data of the State Statistics Committee of Uzbekistan, totaled 32.1 million. Average age of population is 28.1, indicating its young structure compared to other countries. Currently there are 10,400,000 boys and girls under 18 or approximately 40% of entire population of the country. Over 17 million people, that is 64% of population are under 30. Youth of Uzbekistan are under special focus and all reforms in the country are focused on nurturing physically fit, spiritually mature and intellectually advanced young generation with freedoms of though; protection of the youth from external threat and negative influence of mass culture, provision of comprehensive support in safeguarding legal and legitimate interests of the youth and creation of favorable environment for them.

In 2017 the Union of the Youth of Uzbekistan was established as non-profit non-government organization with the mandate to engage the youth in actively participating in the advancement of democratic, political and economic reforms, underway in the country, in reinforcing мира and

согласия in the society; making own contribution the accession process of Uzbekistan to the ranks of advanced countries of the world; as well as promoting effective protection of their rights, legitimate interests and freedoms young generation, enhancing spiritual and professional culture of the boys and girls, support in the realization of their intellectual and creative potential.



In Uzbekistan major focus is on safeguarding and development of national values, traditions, customs of the Uzbek people in the context of universal values. Traditions are inherent part lifestyle and national culture of the people of Uzbekistan occupying significant niche in the system of values and orientations. The strongest family is created on the basis of local customs and traditions. In the years independence of Uzbekistan, historical cultural values and unique national traditions including those related to the family were not only safeguarded but also got further boost in their development in our society.

National values, typical for Uzbek people, which are instilled from early years are as follows:

- venerating own home and homeland;
- homage to the ancestors;
- respect for the elderly, care for the juniors;
- hospitality;
- love for children;
- -spirituality morale education;
- patience, humility in communication;
- tenacity, patience in the times of tests, etc.

In the years of independence a number of efforts were undertaken to revive national values of the Uzbek people, to enrich them with new content and active involvement of the youth in this process.

In Uzbekistan observance of customs and traditions have always been everyone's duty, regardless of his/her origin and social status. In traditional Uzbek families there is quite a strict hierarchy of relations. The younger are certainly subordinated to the head of family and those of older age. Woman has a strong standing as the mother and wife of the head of household, and weak as

subordinated to the husband and his father (or mother). Children are meant to be loved and respected in every family.

The family lays the foundation of moral upbringing of the person, cultural development, which later form the norms of his behavior, enriching the inner world. Family, to a significant extent, stimulates his/her social and artistic activity, enabling comprehensive individual development. Traditions of having many children and co-habitation of several generations in one family under common roof are important factors of stability of the families and mitigation of family conflicts, particularly at the formative stage of a young family. Uzbek families have retained the authority and respect for the parents. Majority of of the youth believe that in order to start a family financial independence of the couple and shared love are essential.

3rd year students of vocational colleges and academic lyceums of the country completing their education in 2017 were surveyed in this study. In total number of respondents, there are slightly more girls- 53% than boys - 47%. This is the reflection of current gender ratio in the modern society. Most of them are the youth at the age of 18 (55,3%), then young people at the age of 19 and older (45,7%), which is typical for Uzbekistan.

Processing of the data demonstrated that in the self-assessment of the welfare of own family, 39.7% of the youth indicated as high, 32.2% - higher than average, and 27% believe they are midlevel. There were relatively low (0.7%) indicators of the families, whose welfare was below average, and there are virtually no low-income families - 0.3%. The youth mostly live in middle-income families.

According to the analysis of the level of education attained by the parents of respondents, 40.9% have higher education, 40.9% have vocational education, and 18.2% of parents of the graduates of the colleges and lyceums have secondary education. This factor reaffirms quite high educational potential parents.

Majority of of respondents live with their parents in a private house (with backyard) 71%, with parents in a flat of a multi-floor apartment block -19.8%, respondents in a dormitory - approximately 2.9%, and rented apartments -4.5% of surveyed respondents. Prevailing majority of the youth live in own houses and apartments of their parents that distinguishes them from their peers from other countries.

Absolute majority of students live at the expense of their parents -95.2%, approximately 14,2% of respondents work for supplemental income along with the support of their parents.

Respondents were asked questions about the language of communication at home among family members, which, to certain extent, shows

Approximately 91.6% of respondents speak Uzbek, 20.1% speak Russian, 3.4% speak Tajik, 3.2% speak Kazakh, approximately 1,2% of students speak English along with mother tongue.

In general, this social portrait of the youth describes the retained national traditions and values, both of those living with their parents, who provide all kinds of support and assistance in upbringing and education of children and the youth.

1.3. Policy to Promote Healthy Lifestyle of the Youth

In Uzbekistan widescale efforts are underway to nurture healthy lifestyle and young generation, in line with modern requirements for regular classes of physical education and mass sports, strengthening of the youth by sports contests of will, belief in own strength and capabilities, nurturing valor, feeling of patriotism, and loyalty to Homeland, systemic effort to select talented athletes among the youth as well as further development of physical education and mass sports.

Currently there are outstanding success stories of the youth at the Olympic Games, world championships, Asian games, international contests. Athletic potential and image of Uzbekistan in the world is growing. Active construction of sports facilities that comply with international standards are underway in the regions of the country. Three-staged sports games such as Umid nihollari, Barkamol avlod and Universiafes are gaining immense popularity among the youth and students.

Significance of mass sports in human life and family as the basis of physical and spiritual health, protection or harmful habits of the youth, entering life with big hope, providing young people the opportunities for implementation their abilities and talents, improvement of the system of selection and targeted preparedness talented athletes are being widely promoted.

State Programme for Further Development of Physical Education and Mass Sports in Uzbekistan was developed and approved for further development of physical education and mass sports in the regions of Uzbekistan, engaging all population groups, particularly the youth, into regular sessions of physical education and sports, enhancing effectiveness of the use of the facilities created for this purpose in the country.³

Powers of the authorities for culture and sports in the area of government youth policy have been codified in the legislation. Inter alia, authorities for culture and sports:





- participate in formulation and implementation national, territorial and other programs in the area of government youth policy;
- undertake among of the youth measures for development of physical education and sports, encourage aspiration to healthy lifestyle and interest in sports;
 - organize popular games, contests on national sports and others among of the youth;
 - promote artistic, popular, and creative activities among of the youth;
- support development of cinema, theatre, music, choreography, fine arts, circus performance, applied arts and variety performance among of the youth, enhancing their artistic and moral benchmarks;

14

³ Resolution on *Measures for further development of physical education and mass sports* of the President of Uzbekistan issued on 03.06.2017.

- facilitate enrichment of mass cultural events and celebrations among of the youth with the ideas and promote close cooperation with artistic unions and other non-government non-profit organizations;
- participate in the development and reinforcing international cultural and sports connections, holding conferences, exhibitions, sports contests among of the youth;
- provide comprehensive assistance to the creative youth, create essential prerequsites for full-fledged expression of their gifts and talents;
- facilitate artistic tours and participation of talented youth at pageants, contests, festivals, other events conducted in the area of culture and sports on international and national scale;
- interact with other bodies and institutions, involved in implementation of government's youth policy.

Powers of the state health authorities and institutions in the area of government youth policy have been codified in the legislation. Inter alia, health authorities and institutions:

- participate in formulation and implementation of national, territorial and other programs in the area of government youth policy;
- organize awareness-raising efforts by disseminating sanitation and hygiene-related knowledge and promoting of healthy lifestyle among of the youth;
 - organize systematic medical check-ups of the youth;
 - undertake measures for medico-social rehabilitation of the youth with disabilities;
- identify, examine and enable medico-social rehabilitation and social adaptation young citizens with alcoholism, drug abuse, toxic substance addiction, mental disorders, infectious and other dangerous diseases;
- interact other bodies and institutions involved in in implementation government youth policy.

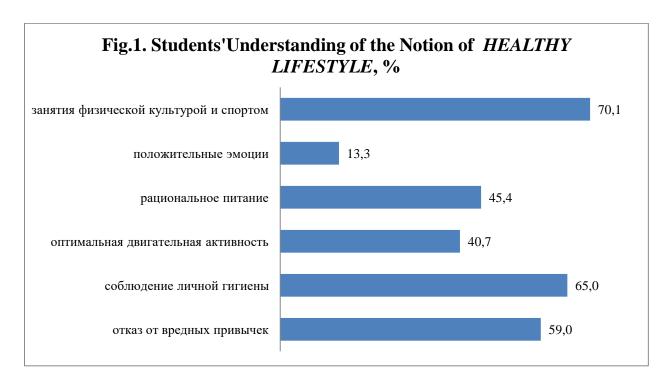
Thus, in Uzbekistan there are significant success stories in the area of sports, numerous activities are undertaken to promote healthy lifestyle of the youth, which ultimately are focused raising healthy generation of the country.

Chapter 2. HEALTHY LIFESTYLE AND ISSUES RELATED TO SAFEGUARDING THE HEALTH OF THE YOUTH

2.1. Awareness of healthy lifestyle and daily regimen (routine)

It is common knowledge that work-leisure balance has major impact on the state of human body. Optimal daily routine – is the most rational distribution of main physiological needs of the person throughout the day as well as proper alternation of the various activities and leisure. Regimen facilitates normal functioning of the internal organs and enables maximum productivity of the person. Proper daily routine is an inherent part of the journey to healthy lifestyle.

Generating the basics of healthy lifestyle since early years, caring about own health throughout life is the foundation of human existence. Currently the issues of students' health is becoming a priority dimension in the development of educational system. To this end, graduates of academic institutions were asked questions about their understanding of healthy lifestyle and what they think of this notion (Fig.1).

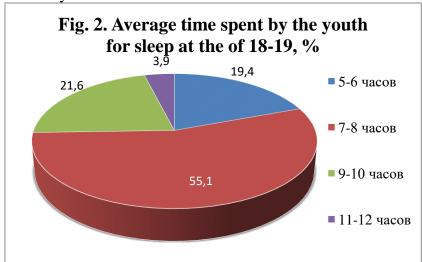


| Physical education and sports |
|-------------------------------|
| Positive emotions |
| Rational nutrition |
| Optimal locomotor activity |
| Personal hygiene |
| Rejecting harmful habits |

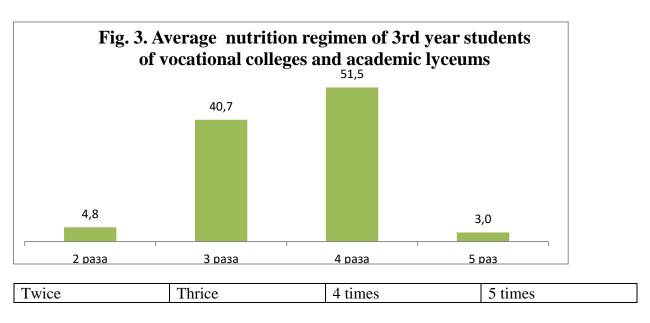
Graduates of the academic institutions, as regards the notion/ term of healthy lifestyle, most often think of physical education and sports (70,1%), personal hygiene (65%), rejecting harmful habits (59,0%), rational nutrition (45,4%), optimal physical activity 40,7% and positive emotions (13,3%). In general, diversity of positive approaches among surveyed youth of the country to the understanding of healthy lifestyle is notable.

By a follow-up question information on actual daily routine of the youth was identified, as 85.7% of respondents answered that they followed daily regimen, 10.3% said they did not, while 4% had difficulties to answer this question.

Students were asked a question, how much time they allocate to sleep (Fig. .2), it turned out that 55% of respondents sleep 7-8 hours, 21.6% - 9-10 hours, 19.4% - 5-6 hours, and 3.9% - 11-12 hours a day.



Scientists determined that optimal time required for optimal rest is 6 to 8 hours with consideration of individual particularities. This regimen of leisure and sleep has positive impact not only for the functioning of the brain but also for the general health of the person.



Most popular answers were as follows: 51.5% of respondents eat 4 times a day, 40,7% of the surveyed eat 3 times a day -and 4.8% do this 1-2 times a day, and 3% of the surveyed eat 5 times a day. Thus, one can say that most respondents maintain the nutrition regimen, which facilitates healthy lifestyle. As for the rest, who skip meals, they may be numerous causes, inter alia, mostly because of improper daily routine.

Also, the respondents were asked questions related to timing of the meals. Majority of respondents observe the following timeframe:

- breakfast: 86.2% - 6-7 a.m., 10,6% - at 8-9 a.m., 1,6% of students do not have breakfast;

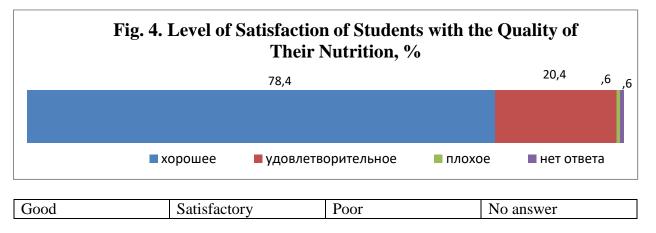
- lunch: 50.4% of students at 11am-12pm, 44.6% -at 13.00-14.00, later at 15.00, approximately 3.9% of respondents do not have lunch at all.
- afternoon snack: 9.4% at 14.00, approximately 38.5% of respondents at 3-4 p.m., 9,6 % students after 17.00. Over 42,6% students have no afternoon snacks.
- dinner: 93.4% of students usually have dinner at 18.00-20.00, approximately 1,7% of respondents at 17.00 and earlier, 4% after 21.00, fewer than 0.8% of students have no dinner at all

Aforementioned findings of the surveys indicate that the youth eat «when they can» rather than following the daily schedule of meals, which has negative effect for the health of the youth and carries the risk of chronic illnesses of gastro-intestinal tract.

Rational nutrition is the key prerequisite not only for prevention of illnesses but also for metabolism and many other factors. For normal growth, development and supporting life activities, the organism needs proteins, fats, carbohydrates, vitamins, and mineral salts in the essential amount.

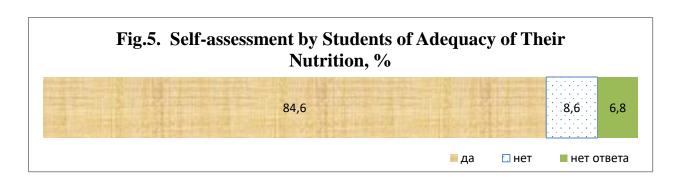
Irrational nutrition is one of the main causes cardiovascular diseases, gastrointestinal disorders, and metabolism- related illnesses.

Students were also asked questions about their satisfaction with quality of their nutrition, majority -85.2% of respondents were quite satisfied with the quality of their nutrition, approximately 11,7% were partially satisfied, 2.3% were not satisfied, and 0.8% had difficulties to answer (Fig.4).



It is notable that the quality of nutrition depends on numerous factors such as the content and optimal ratio of proteins, carbohydrates, fats, vitamins, and other components of healthy nutrition.

Students were asked questions about their assessment their nutrition as healthy/nutritious. 84.6% of those surveyed believed that their nutrition was healthy and nutritious, 8.6 % did believe their nutrition was healthy and nutritious, others had difficulties to answer this question.



| Yes No | No answer |
|--------|-----------|
|--------|-----------|

Findings of the surveys indicate that proper nutrition is not always well-organized in the life of modern youth. Notably not at all academic institutions facilities are available and well-equipped to prepare rational and balanced nutrition at the canteens and buffets of vocational colleges and academic lyceums. Currently majority of the youth eat dry food, primarily fast food, hamburgers, lavash (meat in pita bread), pastry, bread with sausage, etc.

Thus, it is notable that currently health issues of students, leading healthy lifestyle, proper daily routine of the youth, organization of rational and balanced nutrition, inter alia, in centralized manner, are becoming relevant, which should become priority dimension of development of the educational system of the country.



2.2. Role of Sports, Recreational and Cultural Activities in the Life of the Youth

In Uzbekistan major focus is on creation of essential environment for upbringing of harmoniously develop, physically fit, and emotionally mature individuals and promoting them in the society. This is also about the satisfaction of cultural and esthetic need of population, development of theatres, music, fine arts, and other forms of art. Systemic and focused efforts are underway for development of physical education and mass sports. Effective system for training high-class athletes, capable of representing Uzbekistan and attain high athletic results at prestigous international contests.

In the framework of this sociological study, along with identification of the extent of involvement

of the youth in sports to maintain their health, the focus was also on the facilities created at the academic institutions for sports and cultural events.

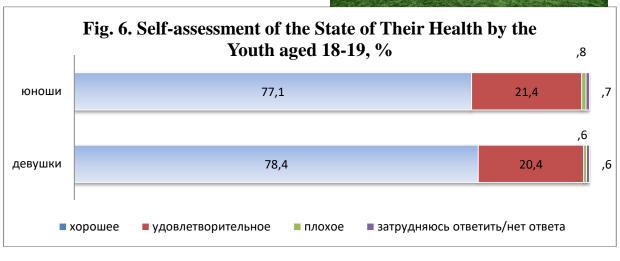
It was identified what is the current place of health in the system of life values of the youth. Selfassessment by the youth of the current state of their health produced following findings (Figure 6).

Satisfactory

Good



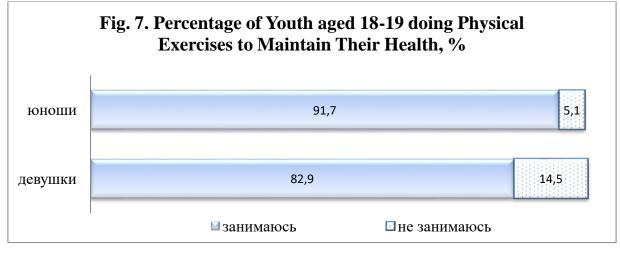
No answer



In general, the youth positively assess state of their health. For example, 78.4% of those surveyed believed their health was in good state, 20.4% - satisfactory, 0.6% answered as poor, and the same number gave no answer. Obtained findings indicate relatively optimal state of the health of the youth.

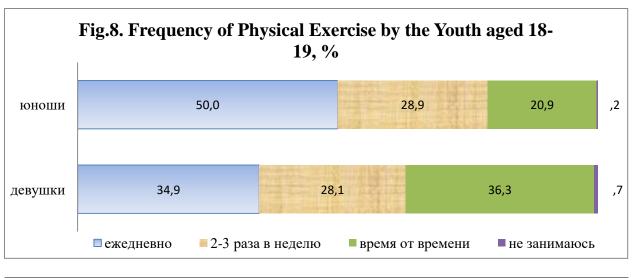
Poor

Students were asked follow-up questions on physical exercises to maintain their health. It turned out that approximately 86.5% of respondents engage in physical exercises, while 10,7% do not, and 2.8% of respondents did not answer this question.



I do I don't

Follow-up question on frequency of physical exercises of the youth to maintain health yields mixed picture, inter alia, disaggregated by gender (Figure 8).



Daily 2-3 times per week Occasionally No exercise

The fact that half of the youth are systematically involved in sports indicate existing disproportion of their classes at the academic institutions.

They engage daily in physical exercises to maintain their health. Girls are behinh for objective reasons (34.9%).

Frequency of 2-3 times per week was reported almost at the same rate - 28,9% and 28,1% respectively, girls at lower rate (36.3%) than boys (20.9%) involved in physical education, that indicates the importance of strengthening the activities to this end, particularly focused on the girls.



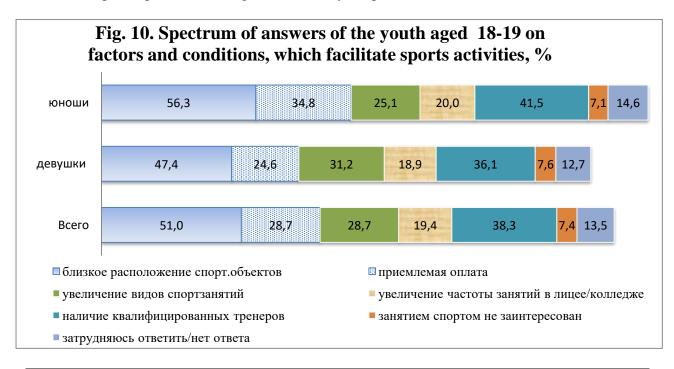
Yes No Difficult to answer / No answer

Major investments were made into education as well as creation of sports facilities at academic institutions, inter alia at vocational colleges and academic lyceums of the country.

Graduates of academic institutions in the framework of this study were asked questions on availability of respective facilities (Fig. .9). Absolute majority of the youth (90,6%) noted that at the academic institution where they are enrolled all facilities are in place for full-fledged engagement of the youth in physical education and sports. In total, 6.0% were not satisfied with the current state of facilities and sports inventory in line with the needs of the youth in different sports, while 3.4% of respondents did not answer this question.

Analysis of the answers of respondents (Fig. 8) and comparison of the answer (Fig. .9) leads to a number of questions related to availability of respective facilities for physical education and sports at academic institutions. As it was already noted, girls quite rarely engage in physical education and sports, inter alia boys.

To this end, students were asked questions on factors and conditions, which facilitated their sports activities (Fig.10). In general, with some gender-specific differences of the youth, important factors are nearby location of sports facilities (51%), availability of qualified trainers – 38.3%, acceptable price – 28.7%, greater diversity of sports at the academic institution 28.7%, etc.



Nearby location of sports facilities Affordable fees

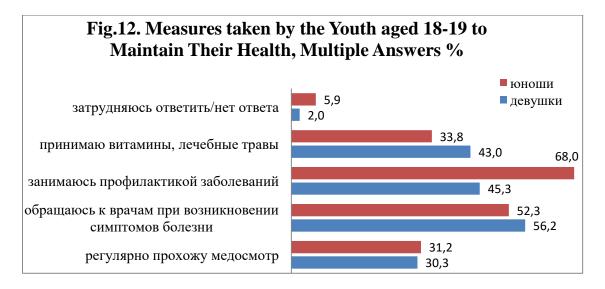
| Greater | Greater frequency of |
|------------------------------------|-------------------------------------|
| Availability of qualified trainers | Not interested in sports activities |
| Difficult to answer / No answer | |

Respondents were asked a question: Which factor has the greatest impact on health?». Graduates of vocational colleges and lyceums at the age of 18-19 answered that positive factors, influencing the health is proper lifestyle -38.3%, proper nutrition -48.0%, negative factors are the environmental situation -40.9% and harmful habits -40.5%.



| Lifestyle | Nutrition | Genetics |
|-------------------|-------------|--------------------------------|
| Harmful habits | Environment | Financial status of the family |
| Sports activities | Other | Difficult to answer / No |
| | | answer |

In this context a question was asked whether the youth look after their their health? Findings of the study indicated that absolute majority of the youth, both male and female have similar indicators, and 92,5% do follow the state of their health, approximately 5% do not pay attention to this issue, and approximately 2,5% of respondents had difficulties to answer.

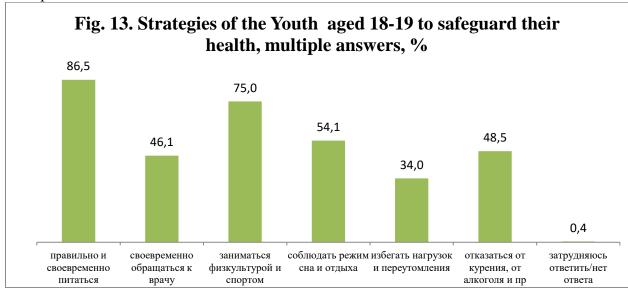


| Difficult to answer / No answer | |
|---|--|
| I take vitamins and herbs | |
| I practice prevention of illnesses | |
| I turn to doctor upon onset of symptoms | |

With regard to the efforts made by the youth, most young men answered that they work on prevention of diseases -68%, seeking the doctor in timely manner upon the symptoms of illnesses -52.3%, take vitamins and herbs -33.8%, approximately one-third of the eboys 31.2% regularly undergo medical check-up, which is usually organized by academic institutions or family polyclinics across the country according to the place of residence.

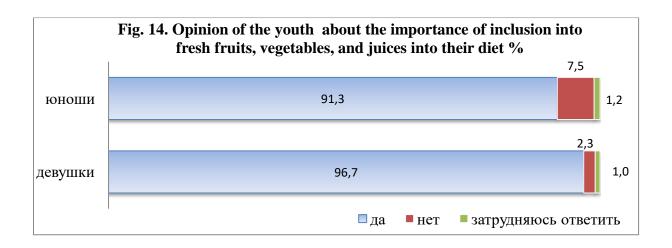
There is slighly different picture among young girls, who seek doctors most often upon onset of the symptoms of the illness – 56.2%, take medical drugs - 43% and 30,3% of girls regularly undergo medical check-up in general. What is a matter of concern is the answer about high level of intake of vitamins and herbs and low level of regular medical check-ups. Preventive medical check-ups are designed to detect the illness at early stages or predisposition si that to start preventive measures and timely treatment, which will help to extend healthy, active life and reduce morbidity and prevent grave complications.

Analysis of the preferences of the youth - the graduates of vocational colleges and lyceums in safeguarding their health was of special interest. Frequency of the answers of respondents both male and female indicated that majority - 86,5% of the surveyed believe that proper and timely nutrition, while 75% - focused on physical education and sports, 54,1% - on proper sleep and leisure, 48,5% - rejecting harmful habits, inter alia, alcohol and tobacco use; 46,1% of respondents believe it is important to seek a doctor in timely manner; 34% - avoid overloads and exhaustion and 0.4% had difficulties to answer (Fig.13). In general, these answers of the youth are appropriate and optimal.

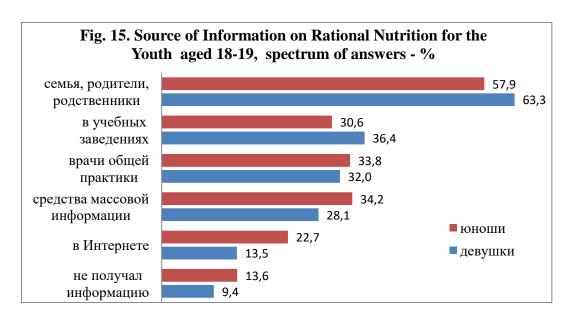


| Proper and | Seeking a | Physical | Balanced | Avoiding | Quit | Difficult to |
|------------|-----------|------------|-----------|------------|----------|--------------|
| Timely | Doctor in | Education | Sleep and | Overloads | smoking, | answer/ No |
| Nutrition | Timely | and Sports | Rest | and | alcohol, | answer |
| | Manner | | | Exhaustion | etc. | |

Considering importance of proper and timely nutrition, inter alia, inclusion of fresh vegetables, fruits and juices into the diet, the youth were asked respective questions.



Analysis indicated 4TO absolute majority (on average - 94,5%) of the youth believe it is essential to include fresh vegetables, fruits and juices into his/her diet. At the same time, young men to a greater extent (7,5% noted *not essential*) and do not realize the importance of this nutrition than girls (2,3%). At the same time, it is notable that despite traditional abundance of fruits and vegetables in the country, overall level of consumption of these products is relatively low compared to foreign countries, which have the deficit of these natural fresh products.



| Family, parents, relatives |
|-----------------------------|
| At academic institutions |
| General practitioners |
| Media |
| Internet |
| Did not receive information |

Findings of the study indicated that the first place where the youth receive information related to rational nutrition is family, parents and relatives (on average 61.1%) and academic institutions (30.6% boys and 36% girls) coming second. On average one-third of respondents noted the media as well as the general practitioner at polyclinics or visiting doctors and experts of academic institutions.

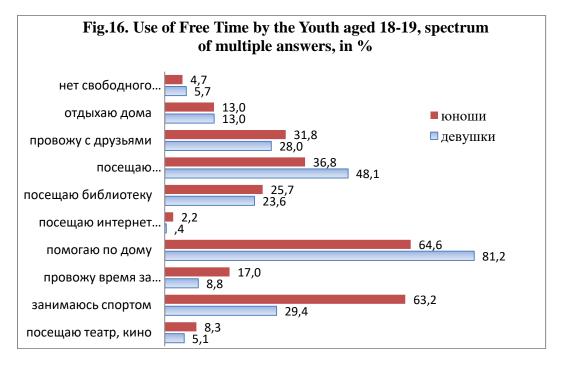
There are some differences in use of Internet in acquisition of adequate information on rational and proper nutrition, as boys use the Internet to a greater extent (22,7%) than girls 13.5%. There is a category of respondents, which noted that did not receive any information on rational nutrition at all, while girls - 9.4%, and boys - 13.6%.

In regional breakdown there are some differences in answers of the youth, for example, in Tashkent oblast -8.4%, in Tashkent -8.4%, had not received any information in the area of rational and proper nutrition, while in Surkhandarya oblast -14% and Andijan oblast -13,2%. In Tashkent (30.8%) and Tashkent oblast (23%) more active use of Internet in the search and use of information on rational nutrition is notable compared to Surkhandarya (6.5%) and Andijan oblasts (9.2%) that in many respects is linked to the development of Internet connection in the respective regions of the country.

Thus, modern youth positively assess state of their health, are active followers of healthy lifestyle, to certain extent engage in physical exercises and sports. However, it is notable that young girls do not pay adequate attention to this issue, although they also need physical training and strengthening of their health, because as prospective mothers they will encounter major loads in future life. Notably academic institutions have created ample opportunities for sports activities, which have not yet been fully utilized, inter alia, in free evening time, extracurricular sessions and clubs in various sports.

2.3. Behavioral Models of the Youth in the Society

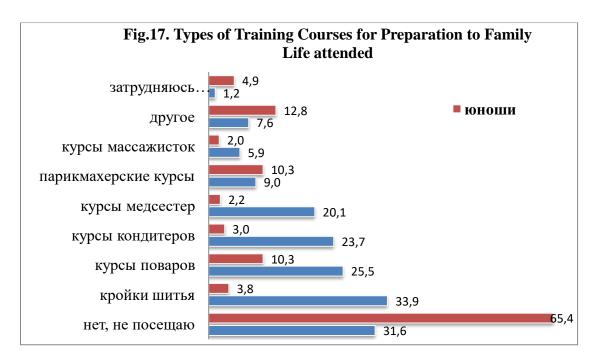
Preferences of the youth related to their free time and leisure were explored in the framework of study (Fig.16).



| No free time |
|----------------------------|
| I rest at home |
| Spend time with friends |
| Visiting |
| At library |
| Browsing the Internet |
| I help with house chores |
| I spend time doing |
| I do sports |
| I go to theatre and cinema |

Processing of the data indicated that majority of the youth help with household chores (64.6% boys, and 81.2% girls), attending various training courses, inter alia, focused on subsequent admission into universities, to a greater extent girls 48.1% and approximately 36,8% boys.

Over 63.2 % of the boys are engaged in sports, while among girls this indicator is approximately 29.4%. Around one-third of respondents spend free time with their friends, a quarter of respondents attending libraries. Also boys and girls spend free time at home (on average 13.0%), small number attending cinema and theatres (6.4%), boys to a greater extent spend time with a computer (17%) than girls (8.8%).



| Difficult to answer |
|--------------------------|
| Other |
| Masseuse training course |
| Hairdresser training |
| Nurse training |
| Patisserie training |
| Culinary training |
| Seamstress training |
| No, I do not attend any |

More in-depth analysis of the enrolment of the youth at various training courses, with 48.1% of girls, and approximately 36.8% of the boys indicated that in addition to the training courses for preparation to university, there are also courses for preparation to family/routine life (Fig.17).

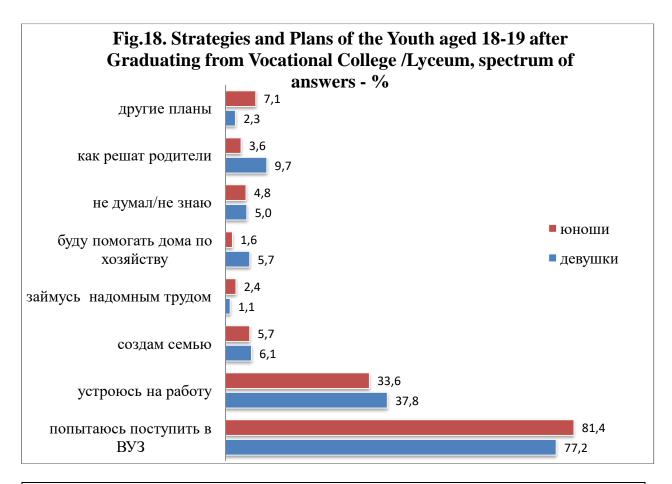
Also more girls attend the courses for preparation to family life compared to boys. Over 65.4% boys and 31.6% girls do not attend any training courses that is quite natural in the context and traditions of Uzbekistan where preparation of girls and boys to future family life is one of the priority responsibilities parents.

Girls, to a greater extent, attend training courses for seamstresses -33.9%, chefs/cooks -25.5%, confectioners -23.7%, nurses -20.1%, and hairdressers 9%. Attendance of boys at these courses is insignificant, as these courses to a greater extent are selected from the perspective of future work after completion of vocational colleges and academic lyceums of the country.

The youth were asked questions on the strategies of behavior and future plans after completion of the lyceum / college (Fig. 18).

Absolute majority of respondents are planning to continue their education and apply to higher academic institutions (boys -81.4%, girls -77.2%), which is customary and typical for the mentality of the population in the country, where aspiration to higher education is traditional, s it has always been prestiguous in the society.

Approximately one-third of respondents (33.6 and 37.8%, respectively) are planning to find a job, the number of the youth planned to start a family is small, merely 5.7% for boys and 6,1% for girls, which indicates to certain extent that the youth does not accept early marriage.



| Other plans |
|---|
| Parental discretion |
| Did not think of it yet / do not know |
| I will be helping with the household chores |
| Home-based work |
| Will get married |
| I will get a job |
| I will apply for university admission |

In various social and socioeconomic contexts of life and activities of the youth sometimes there are situations where attitude to education undergoes significant changes. This happens under the influence of many factors, among which: affiliation to different social groups, financial standing as well as changes in the educational system related to modernization. One of the factors of social affiliation is education of the parents.

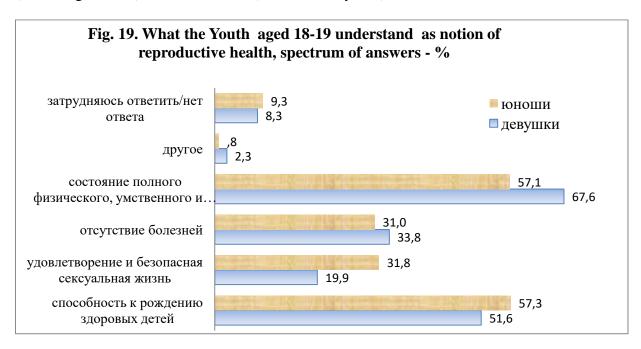
As indicated in the study, in the families, where parents have higher education, percentage of the youth who decide to apply to higher academic institutions after completion of the college or lyceum is 86.3% of respondents, while in case of parents who have secondary education, this figure stands at 63.1%. Also, excessively high indicators of strategies and plans for university admissions at the households with high incomes - 83.5%, compared to middle-income and lower-middle income - 69.3%.

Thus, behavioral models of the youth in modern society, leisure and self-development efforts to become a mature individual, vocation orientation of the youth, aspiration to obtain higher education are important dimensions of the success of the reforms and environment created for personal development in the country.

Chapter 3. REPRODUCTIVE HEALTH OF THE YOUTH AND PREPAREDHOCTЬ TO FAMILY LIFE

3.1. Awareness of Reproductive health and sex education of the youth

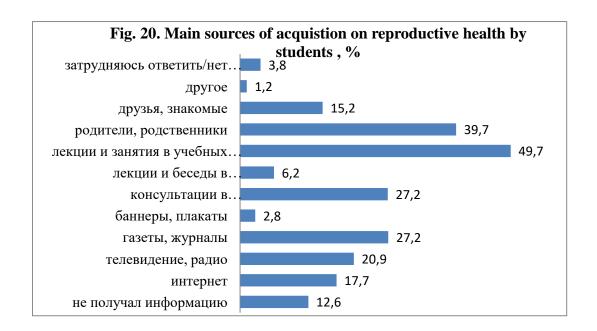
Based on the outcomes of the conducted survey to identify udnerstanding of reproductive health among the youth following findings were obtained (Fig. 19): 67,6% of girls and 57,1% boys selected option of the answer, proposed by WHO: state of complete physical, intellectual and social well-being indicating that majority of the youth properly understand the meaning of this term, ability to give birth to healthy children, boys believe to a higher extent - 57,3%, and 51,6% - girls. An important point noted by respondents that this notion must include absence of illnesses (on average 32,6%) and safe sex life (24.7% of the youth).



| Difficult to answer / No answer |
|--|
| Other |
| State of complete physical, intellectual and |
| Absence of illnesses |
| Satisfaction and safe sex life |
| Ability to give birth to healthy children |
| |

There was also part of the youth, who had difficulties to answer this question, and those who do not adequately understand this term, and this requires introduction of respective educational programs focused on the student youth.

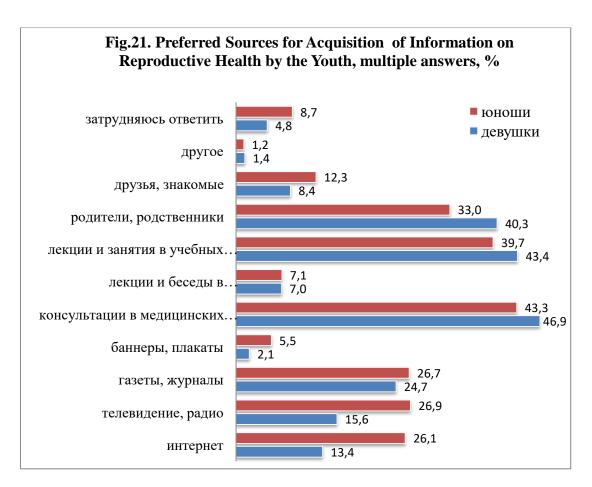
As indicated in the analysis (Fig.20), main sources for acquistion of information on reproductive health for the youth are academic institutions -49.7%, parents -39.7%, relatives, friends, and acquaintances -15.2%; newspapers and journals -27.2%, TV & radio-20.9%, Internet -17.7%. The role of counseling by the health workers is quite high -27.2%.



| Difficult to answer / No answer |
|---|
| Other |
| Friends, acquintances |
| Parents, relatives |
| Lectures and classes at academic institutions |
| Lectures and talks at mahallas |
| Counseling at health centers |
| Banners, posters |
| Newspapers, journals |
| TV, radio |
| Internet |
| Did not receive information |

There are differences across regions, for example, approximately 30% of respondents in Tashkent and Tashkent oblast received information on reproductive health from Internet, while in Andijan and Surkhandarya oblasts this figure is less than 10% of respondents. Furthermore, there is a category of respondents, who has not received any information on reproductive health, this is 12.6% of respondents, of which 10.9% are girls and 15% are boys.

Unfortunately, because of the mentality, there are few families, which discuss the issues in the area of sex education. At the same time, parents are one of the important sources of information on sexual and reproductive health of their children. Considering the mentality of young generation and importance of consideration of their opinions to obtain respective information, the graduates of vocational colleges and lyceums were asked follow-up questions about the sources, from which they would like to receive information on reproductive health (Figure 21).



| Difficult to answer |
|---|
| Other |
| Friends, acquintances |
| Parents, relatives |
| Lectures and classes at academic institutions |
| Lectures and talks at mahallas |
| Counseling at health centers |
| Banners, posters |
| Newspapers, journals |
| TV, radio |
| Internet |

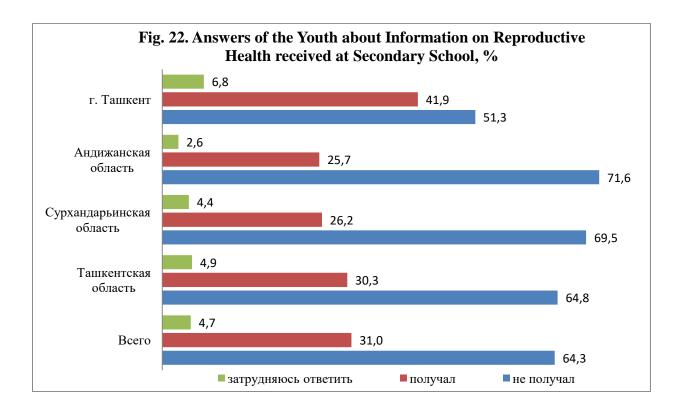
The data obtained indicated that majority of respondents would like to receive this information at medical centers (boys -43.3%, girls -46.9%). This indicates that the youth want to receive this information from the competent experts, namely health workers.

Quite a large number of respondents believe that academic institutions (schools, lyceums and vocational colleges) must play an important role in informing and organizing special sessions, which shed light on this issue for the youth (on average 42% of respondents).

The youth believe that their parents and relatives should also be actively involved in informing their children on the issues of reproductive health (boys - 33%, girls -40.3%).

In general, the role of the conventional media are also high, inter alia, in boosting the awareness campaign by the television and radio (boys -26.9%, girls -15.6%), newspapers and journals (25%). Internet was mentioned by 26.1 % of the boys, while girls indicated this source in 13.4% of the answers.

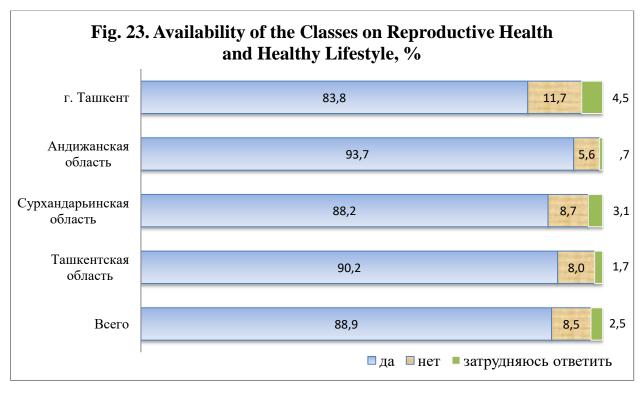
As it turned out that in general approximately 64.3% of respondents had not received information on reproductive health at the time of study at secondary school, 31% received it, and 4,7% had difficulties to answer. This means that majority of respondents had not received adequate knowledge on reproductive health at secondary schools.



| Tashkent city | | | | | |
|---------------------|----------|--------------|--|--|--|
| Andijan oblast | | | | | |
| Surkhandarya oblast | | | | | |
| Tashkent oblast | | | | | |
| Total | | | | | |
| Difficult to answe | Received | Not received | | | |

Obtained findings talk about existing flaws in the mandatory educational programs on sex education and reproductive health in the framework of secondary school curriculum.

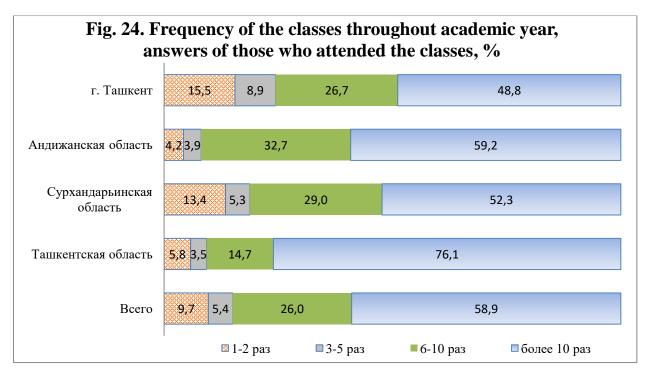
Furthermore, respondents were asked questions about the role and place of vocational colleges and academic lyceums in conducting classes on reproductive health and of healthy lifestyle. Absolute majority of respondents answered positively (88.9%), and approximately 8.5% responded that there are none and 2.5% had difficulties to answer (Fig. .23).



| Tashkent city | | | | | |
|---------------------|----|---------------------|--|--|--|
| Andijan oblast | | | | | |
| Surkhandarya oblast | | | | | |
| Tashkent oblast | | | | | |
| Total | | | | | |
| Yes | No | Difficult to answer | | | |

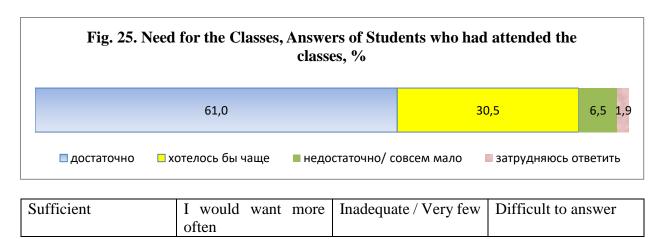
The highest number of answers by respondents were noted in Andijan oblast -93.7%, Tashkent oblast -90.2%, while the indicators were not as high in Surkhandarya oblast -88.2% and Tashkent was at the end with 83.8%.

Among surveyed respondents, who had attended these classes, the details of these sessions were sought, specifically, frequency and number of classes on healthy lifestyle and reproductive health throughout academic year (Fig. 24). It turned out that there are differences across the regions of the country. In Andijan (59.2%) and Tashkent oblast (76.1%) the frequency of the classes is over 10 times a year. Extremely small number of classes «1-2 times a year» were noted in the answers of respondents in Tashkent – 15.5% and Surkhandarya oblasts – 13.4%. These indicators speak of the need for in-depth analysis of the causes of this situation and the need for recruitment of appropriate staff on the level of rayons and oblasts of the country, who could conduct these sessions professionally, inter alia, with certain frequency in the enrolment of students of vocational colleges and academic lyceums in the respective regions of the country.

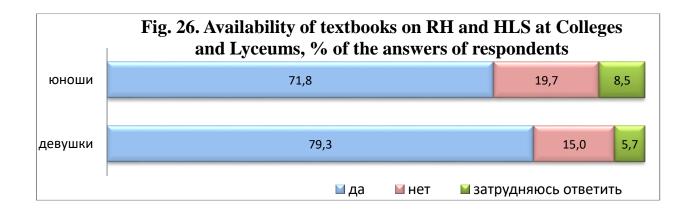


| Tashkent city | | | |
|---------------------|-----------|------------|--------------------|
| Andijan oblast | | | |
| Surkhandarya oblast | | | |
| Tashkent oblast | | | |
| Total | | | |
| 1-2 times | 3-5 times | 6-10 times | More than 10 times |

Students aged 18-19 were asked an additional question *What do you think, is the number classes on the issues of healthy lifestyle and reproductive health adequate?* Approximately 61% of respondents believe that it is sufficent, 30.5% of respondents would rather have more of these classes, 6.5% believe that it is too few, and 1.9% had difficulties in answering the question.



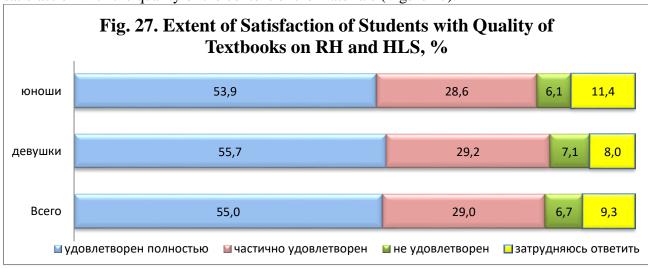
This indicates that the youth are highly interested in this issue, they expressed the willingness to increase the number of classes on healthy lifestyle and reproductive health, and thus, in own health.



| Boys | | |
|-------|----|---------------------|
| Girls | | |
| Yes | No | Difficult to answer |

To the question *Are there textbooks and visual aids available on reproductive health?* girls to a greater extent responded positively - 79.3% than boys - 71.8%. About one-fifth of the boys reported the lack of *textbooks and visual aids* in the area of reproductive health and healthy lifestyle, inter alia for use at the libraries of academic institutions.

Among the students, who have *textbooks and visual aids in the area* of reproductive health and of healthy lifestyle at their academic institutions, a question was asked about the extent of their satisfaction with the quality of the content of the materials (Figure 27).

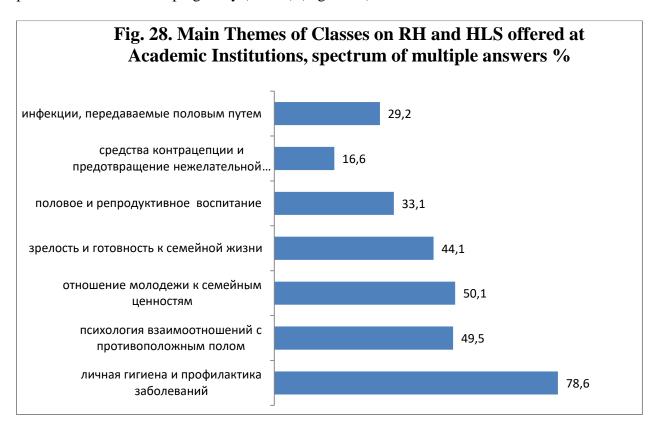


| Boys | | | |
|-----------------|---------------------|--------------|---------------------|
| Girls | | | |
| Total | | | |
| Fully satisfied | Partially satisfied | No satisfied | Difficult to answer |

Survey indicated that over half of those surveyed - 55% were satisfied with the quality of *textbooks and visual aids* in full, 29% were satisfied partially, 6.7% were not satisfied, while remaining 9.3% of the surveyed had difficulties to answer.

Analysis of the findings of the survey indicated that the vocational colleges/lyceums mostly offer classes on the subjects such as personal hygiene and prevention of diseases (78,6%), attitude of

the youth to family values (50.1%), psychology of relations with the opposite gender (49.5%), maturity and readiness to family life (44.1%), and smallest number of classes on the issues of sex and reproductive education (33.1%), sexually transmitted infections (29.2%), contraceptives and prevention of unwanted pregnancy (16.6%) (Figure 28).

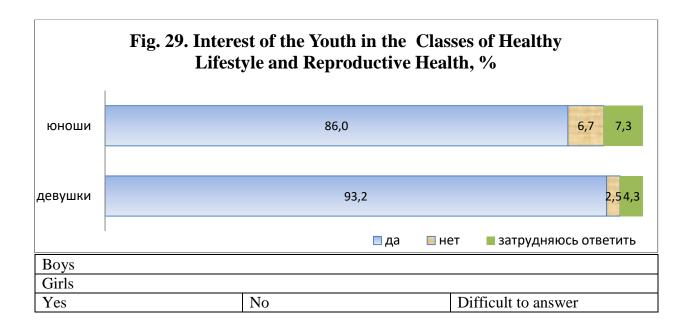


| Sexually transmitted infections | | |
|--|--|--|
| Contraceptives and prevention of undesirable pregnancies | | |
| Sexual and reproductive education | | |
| Maturity and readiness for family life | | |
| Attitude of the youth to family values | | |
| Psychology of relations with the opposite gender | | |
| Personal hygiene and prevention of illnesses | | |

The data obtained indicate inadequacy of the classes and teachers and the depth of the subjects of the classes with students competent in the issues of reproductive health and healthy lifestyle.

As it is visible from the survey, the knowledge of the respondents and level of their awareness on the issues of reproductive health is low. While the level of knowledge on general issues of reproductive health is still quite high, along with greater complexity this indicator goes down. The main cause of low awareness of the youth on this matter is that these subjects are rarely discussed by the young people at school with teachers or at home with parents. Thus, the data obtained are generic and not specific, as a rule. Analysis of the findings of the survey indicated that majority of teenagers do not know what are STIs, HIV-infection, syphlis, and gonorrhea, while infections such as Hepatatis A, B, C, D, chlamidiosis, sexual herpes were indicated by the small number of of respondents.

In the course of survey, high interest of the youth (93.2%-girls) and (86.0% - boys) in additional classes on the issues of RH and HLS was identified.

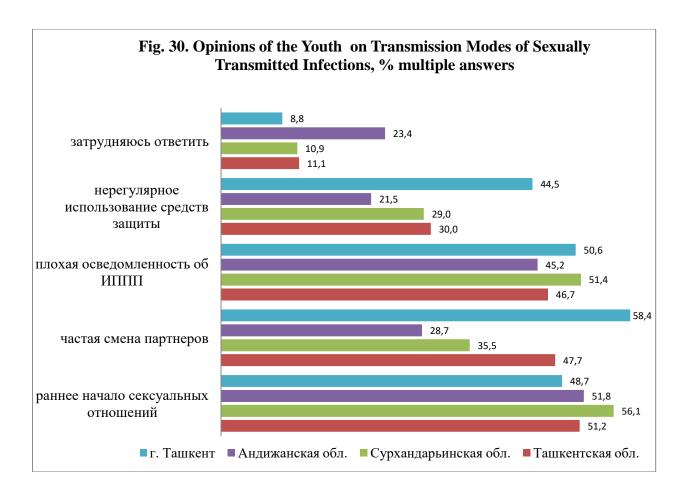


Thus, the main areas of efforts in safeguarding reproductive health of teenagers should be reinforcing information and communication activities on healthy lifestyle and reproductive health, improving awareness-raising efforts at the academic institutions and beyond, increasing the number and quality of the studies on reproductive health of teenagers. Quality of education, promoting professionalism of the teachers and methodologists in the regions of the country, improving the quality of textbooks and aids, accessible and interesting for the youth is particularly relevant.

3.2. Awareness of HIV/AIDS and STDs, Risks of Infection and Means of Protection

Awareness of the graduates of vocational colleges and academic lyceums aged 18-19 in the prevention HIV/AIDS as well as various issues and problems, which may cause sexually transmitted infections were analyzed in the framework of this study (Figure 30).

Based on the opinion of the surveyed youth, expanding the knowledge about sexually transmitted infections will enable to significantly reduce the risk of HIV/ AIDS as well as STIs. The youth are very much interested in acquisition of comprehensive knowledge in these vital issues.

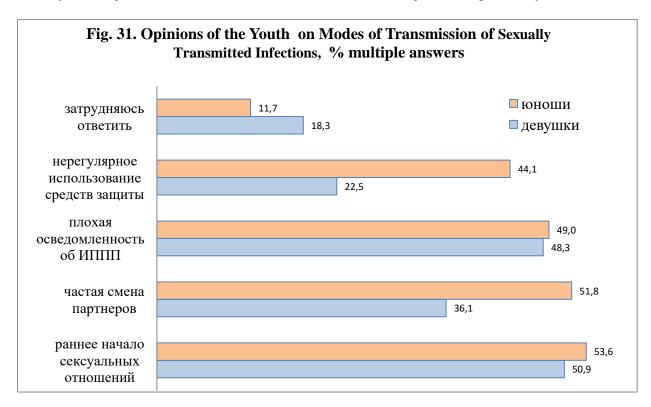


| Difficult to answer | | | | | |
|--|--|--|--|--|--|
| Irregular use of the means of protection | | | | | |
| Poor awareness of STIs | | | | | |
| Frequent change of partners | | | | | |
| Early start of sexual relations | | | | | |
| Tashkent city Andijan oblast Surkhandarya oblast Tashkent oblast | | | | | |

To the question, what are the main causes and modes of transmission sexually transmitted infections (STIs) higher number of the youth gave the right answers: 52% indicated that STIs may be contracted in early unprotected sexual relations, and 48.6% pointed to poor awareness on STIs, non-use of the means of protection and prevention -31.3%, frequent change of partners -42.5%, and 13.5% of respondents had difficulties to answer.

Furthermore, there are regional differences in the answers of respondents. For example, greatest number of respondents - 23.4% in Andijan oblast had difficulties to answer this question, while

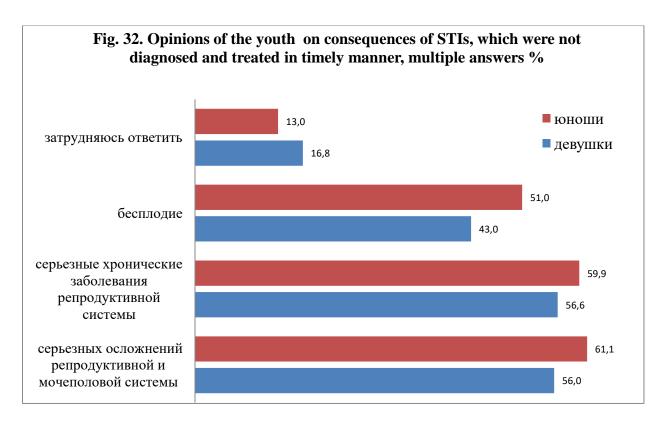
in Tashkent merely -8.8%. This is mostly because in Ferghana valley, the level of perception of this sensitive subjects is even greater taboo in other regions of the country. At the same time higher indicators of the awareness of the youth in Tashkent that the causes may be frequent change of partners -58.4%, irregular use of the means of protection -44.5% compared to the respondents from other regions of the country in many respects may be linked to the fact that in capital of the country the subject of sexual relations is not such a closed subject among of the youth.



| Difficult to answer | |
|--|--|
| Irregular use of the means of protection | |
| Poor awareness of STIs | |
| Frequent change of partners | |
| Early start of sexual relations | |

Differences in the answers of the boys, who are better aware in the issues of early sex relations compared to the girls, both on causes and the modes of transmission of STIs were interesting. For example, boys mentioned the irregular use of the means of protection twice as often (44.1% -boys, 22.5% - girls. Furthermore, half of the boys and one-third of the girls mentioned frequent change in partners as a cause.

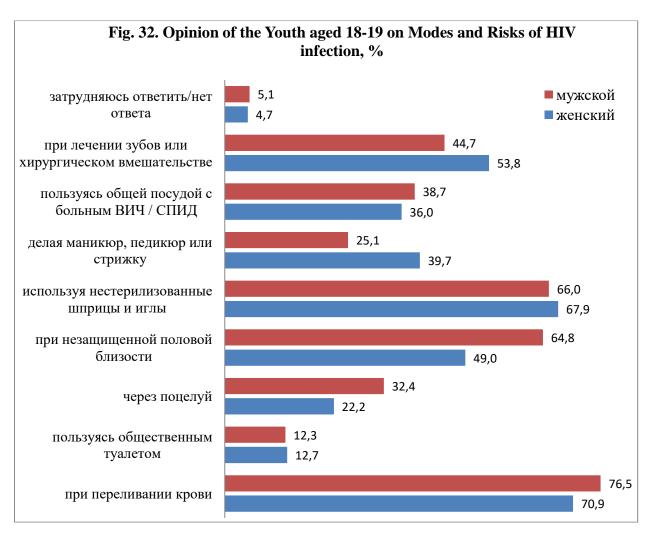
In order to test the knowledge of respondents, questions were asked about the implications of STIs, which were not diagnosed and treated in timely manner, and these findings were presented in Fig.32. In general, majority of the youth understand that these diseases and infections may have serious implications, primarily on the reproductive system of the body.



| Difficult to answer |
|---|
| Infertility |
| Serious chronic illnesses of reproductive system |
| Serious complications of reproductive and urogenital system |

Around 58.1% of respondents answered that these problems may cause serious complications of the reproductive and urogenital system, 57.9% mentioned serious chronic diseases of the reproductive system, 46.3% of respondents said it causes infertility both of the girls and boys, 15.3% had difficulties to answer.

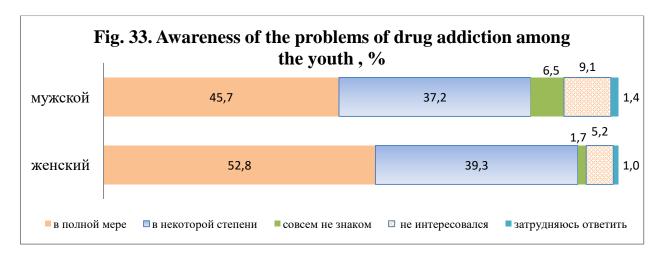
Considering that the youth are in the risk group of HIV/AIDS, graduates of vocational colleges and lyceums of the country aged 18-19 were asked questions about the modes and risks of HIV/AIDS infection. In general, approximately 73.2% of the surveyed believe that HIV/AIDS may be transmitted to a healthy person with blood transfusion, 67.1% said with use of non-sterile syringes, 55.4% pointed to unprotected sex, 50.1% - surgical and dental intervention, 37.1% with use of utensils of HIV/AIDS patient, 33.8% mentioned manicure or pedicure at beauty salons in салонах, 26.3% - by the kiss, 12.6% - using a public toilet and 4.8% had difficulties in answering.



| Difficult to answer / No answer | | |
|--|--|--|
| Upon treatment of teeth or surgical intervention | | |
| Using common utensils with HIV/AIDS patient | | |
| Doing manicure, pedicure or haircut | | |
| Using non-sterile syringes and needles | | |
| Unprotected sexual contact | | |
| By kiss | | |
| Using public toilet | | |
| Blood transfusion | | |

Data, obtained in the course of this study, indicate that the level of reproductive education of the modern teenagers is not very high and does not match the modern requirements. Particularly it related to the issues related to STIs, inter alia HIV/AIDS. Inter alia, related to the use of public toilet -12.5% as well as kiss (22.2% of girls and 32.4% of boys).

To this end, graduates of academic institutions at the age of 18-19 were asked questions about what they know about the problem of drug addiction (Fig.33).



| Boys | | | | | |
|----------------|----------------|-------------------|----------------|-----------|----|
| Girls | | | | | |
| In full extent | To some extent | Don't know at all | Not interested | Difficult | to |
| | | | | answer | |

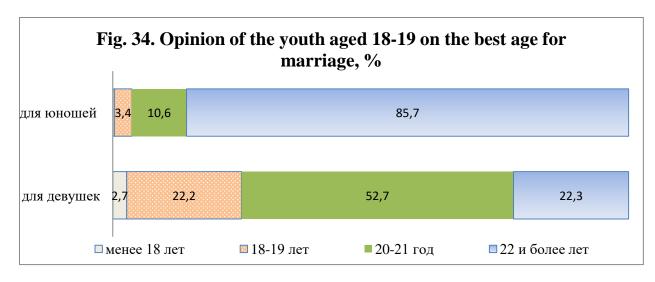
50% of respondents answered that they are fully familiar with the problems of drug addiction, 38.5% of the youth of both genders are familiar to certain extent. Around 6.5% of the boys and 1.7% of the girls are not familiar with this problem at all. Also percentage of the boys, who were never interested in these issues is high (9.1%) compared to girls (5.2%). No distinct features regarding awareness rates were not found in the regions.

3.3. Attitude of the youth to early marriages and creating a healthy family

Historically quite early marriages of the youth were traditional in Uzbekistan, while parents tried to get their children married earlier, providing them regular support in starting a young family. Transformation of traditional values is underway in Uzbekistan, inter alia, in the families, in the relations of family members, in entering marriage, and planning the number of children. According to Civil Code of Uzbekistan, a girl cannot get married before 17.

Muhitdinova, M.D. believes that optimal age for women to give birth is from 20 to 30. 15-20% of women, who had children before 20, often suffer from various gynecological diseases in pregnancy and post-partum.

A new article was introduced in the Code of Administrative Liability of Uzbekistan, namely "Violation of legislation on marriage age", according to which, marrying a person under the marriage age is subject to administrative and criminal charges. In this study, a probe into the modern youth wiith regard to early marriages and starting a healthy family was of special interest.



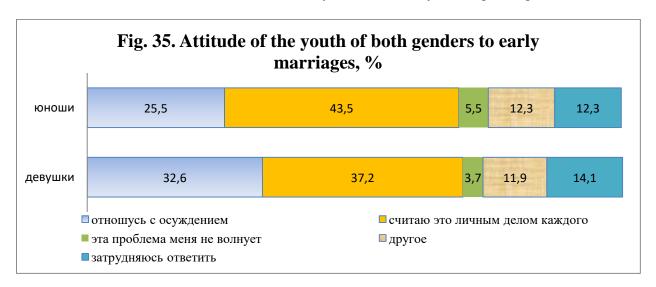
| For boys | | | |
|-----------|-------|-------|--------------|
| For girls | | | |
| Under 18 | 18-19 | 20-21 | 22 and older |

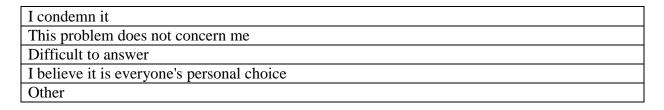
As indicated by the analysis, in general 52.7% of respondents believe that the most acceptable age for marriage of the girls is 20-21. Almost equal number of respondents (22.2%) noted that optimal age is 18-19 as well as over 22 years, a small number (2,8%) answered 17-18.

According to the opinion of the youth, the best age for men is over 22 - answered majority of respondents – 85.7%, and approximately 10,6% answered - 20-21, while 18-19 was noted merely by 3.4%. Based on the aforementioned, one can note that majority of the youth believe that marriage in early age is unacceptable. The study done by the Institute of Social Studies in 2016 indicated that average marriage age in Uzbekistan quite young, particularly among Uzbeks and is approximately 22.3, men at 23.8 and girls at 20.9.

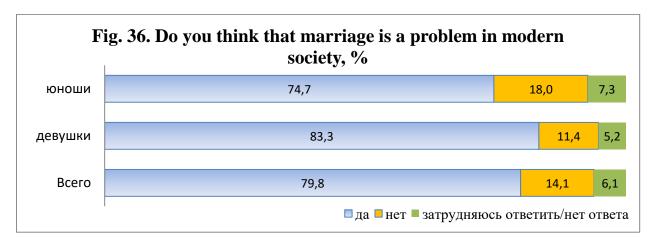
Early marriage, from legal perspective is the marriage between young people under the legal age. Looking at early marriage from psychological perspective is the marriage, entered by the people who were not morally prepared for this.

The answers obtained about the attitudes of the youth to the early marriages (Figure 35).





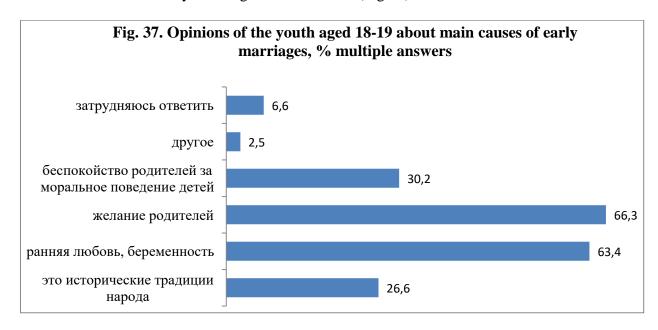
According to the findings of the survey, 25.5% of the boys and 32.6% of the girls are against early marriage. 43.5% of boys and 37.2% of girls believe that this is personal matter for everyone. The issue of early marriages do not concern insignificant number of the youth.



| Boys | | |
|-------|----|---------------------------------|
| Girls | | |
| Total | | |
| Yes | No | Difficult to answer / No answer |

Survey also indicated that majority of the youth 79.8% believe that early marriages constitute a big problem not only for the family but also for the society. It is important to note that early marriages very often break down because young and unprepared spouses encounter different difficulties. Most young people have low sense of responsibility for the fate of the family. Often their moral and psychological unpreparedness to modern life is notable. Teenagers cannot assume

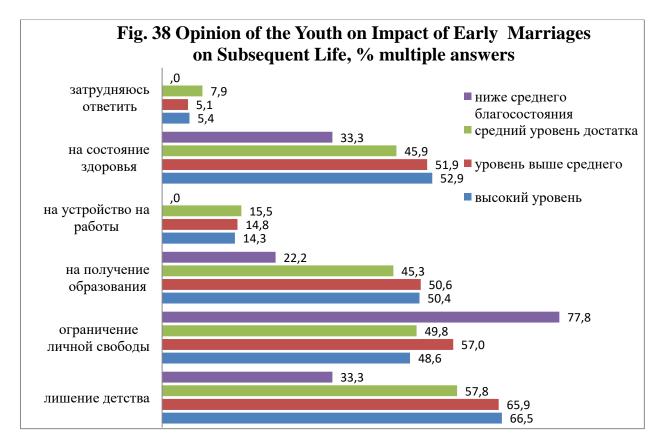
certain responsibilities before the society. Thus, modern youth condemn early marriages, which is a positive trend. Survey of the opinions of the youth in this area indicated that most important causes and factors of early marriages are as follows (Fig.37)



| Difficult to answer |
|---|
| Other |
| Concern of parents for moral behavior of children |
| Parental discretion / preference |
| Early love, pregnancy |
| Historical tradition of the people |

Most respondents believe that the main causes of early marriages are the willingnees of (66.3%) parents, early love and pregnancy – 63.4%, 30.2% concern of the parents for moral behavior of their children, 26.6% historical traditions. Thus, it is visible that still in the choice of the couples and their subsequent fate the parents and their will make the difference.

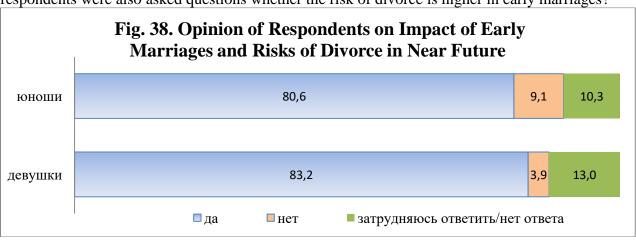
The opinions of respondents on future life of the youth in case of early marriages were analyzed (Figure 38).



| Difficult to answer |
|---------------------------|
| State of health |
| Employment |
| Education |
| Limiting personal freedom |
| Losing own childhood |
| |
| |

Analysis of the findings of the survey in the breakdown of level of well-being of families of respondents indicated some distinct features considering that absolute majority of young families at at the case of their parents.

In recent years the number of divorces is growing mostly young families, To this end, the respondents were also asked questions whether the risk of divorce is higher in early marriages?

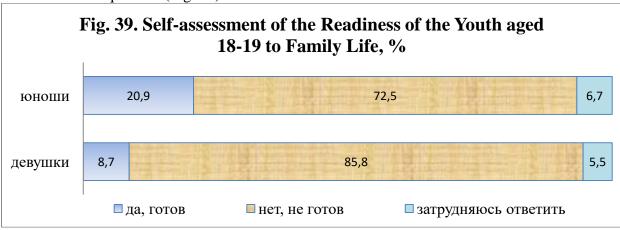


| Boys | | |
|-------|----|---------------------|
| Girls | | |
| Yes | No | Difficult to answer |

The analysis indicated that absolute majority of the youth at the age of 18-19 believe that early marriages are quite risky and can lead to family conflicts. Thus, in general, the surveyed youth completing their studies at vocational colleges and academic lyceums in general have negative views on early marriages, believe that this is not only the problem of the young but also of the society as a whole. The youth prefer to get married at more mature age, while boys several years later than girls after reaching physical and psychological maturity and independence.

3.4. Awareness and level of preparedness of the youth to family life

As a result of the study it was identified that most of the youth (80.4%) are not yet ready for family life, merely 13.6% of respondents believe they are ready to family life and 6% could not answer this question (Fig. 39).



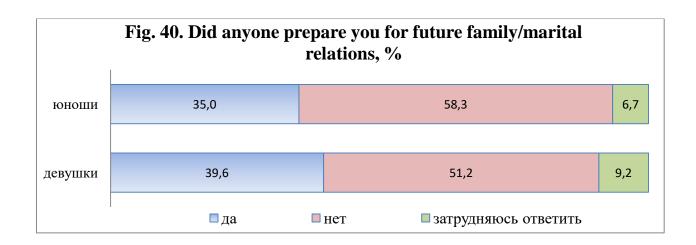
| Boys | | |
|-----------------|--------------------|---------------------|
| Girls | | |
| Yes, I am ready | No, I am not ready | Difficult to answer |

There are differences in answers of the girls and boys at the age of 18-19. 85.8% of girls and 82,5% of boys are not yet ready for family life. Approximately 8.7% of girls and 20.9% of the boys are ready for family life. In general, students completing their study at vocational colleges and academic lyceums are not ready for family life.

It is known that many problems of young couples are caused by psychological and physical immaturity of spouses. The study done by sociologists, psychologists, and pedagogues indicate that a stable family may be established with certain degree of the readiness of young people to family life.

Based on the conducted study it is visible that the youth to a greater extent are not ready for marriage and the youth need to acquire knowledge, understanding of strong family, harmonious family relations and other important issues of family life, inter alia, in the issues of reproductive health and upbringing of future children.

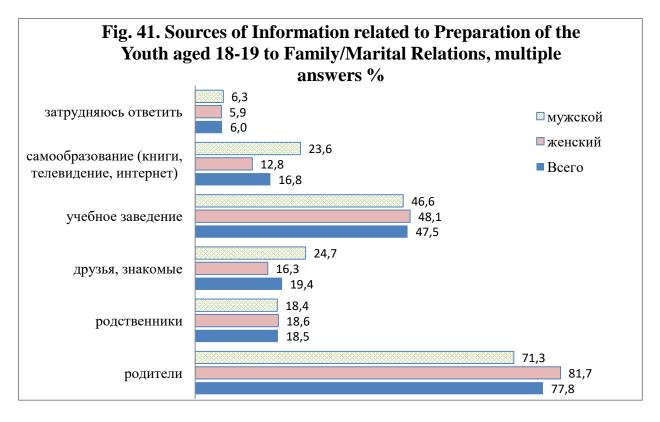
To this end, a question was asked whether the youth received respective information in the area of family/marital relations (Figure 40).



| Boys | | |
|-----------------|--------------------|---------------------|
| Girls | | |
| Yes, I am ready | No, I am not ready | Difficult to answer |

As indicated by the analysis, majority of the youth at the age of 18-9 had not received any information on future family-marital relations with boys scoring higher (58.3%) than girls (51.2%). On average, one-third of the boys received some information. Among girls this indicator is higher (39.6%) that in many respects due to the fact that girls usually get married at young age, and they are trained for family life mostly by their mothers.

Meanwhile, the respondents, who gave positive answer to the aforementioned question, indicate who prepared them for family relations. (Figure 41).

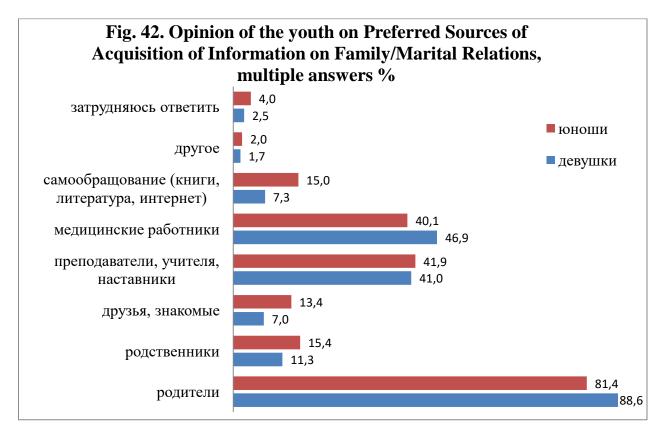




| Academic institution | |
|------------------------|--|
| Friends, acquaintances | |
| Relatives | |
| Parents | |

It was found that preparation of the youth to family-matrimonial relations is primarily undertaken by the parents -77.8%, secondly, by the academic institutions -47.5%, thirdly, by other relatives -18.5%, self-education -16.8%, and 6% of respondents could not answer. More boys are involved in self-education (23.6%) than girls (12.8%), discussing these themes with friends and acquaintances, boys to greater extent (24.7%) than girls 16.3%. More girls (81.7%) than boys (71.3%) discuss these subjects with parents.

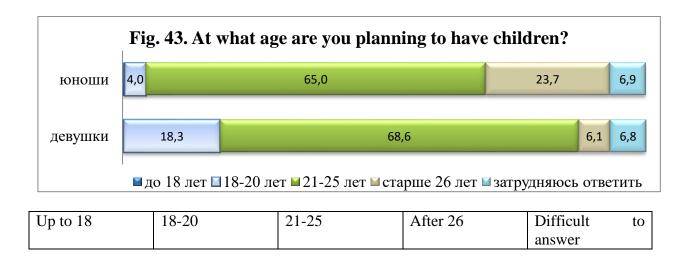
Opinions of the youth at the age of 18-19 related to who exactly should work with the youth for preparation to family life was analyzed. Processing of the findings indicated that according to the views of the youth, parents should do it first -85.6%, teachers and mentors -41.3%, and health workers -44.1%. Also the youth prefer to receive information by self-education, to a greater extent boys (15%) than girls (7.5%-twofold difference), through friends and acquaintances -13.4% and 7%, respectively (Figure 42).



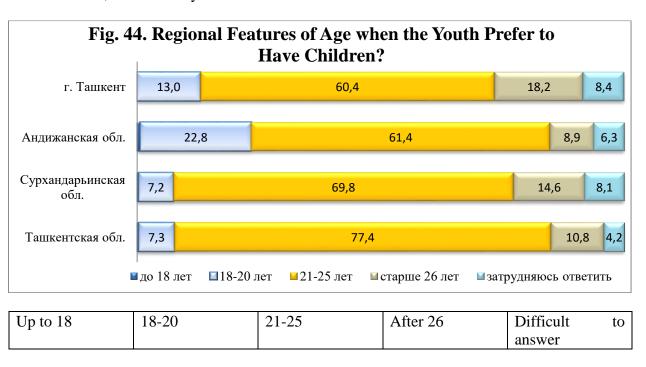
| Difficult to answer |
|--|
| Other |
| Self-education (books, literature, Internet) |
| Health workers |
| Teachers, mentors |
| Friends, acquintances |
| Relatives |
| Parents |

Exploring plans and future intentions of the youth, a number of questions were asked on children and the number thereof. Based on the opinion of the surveyed youth, most favorable age for childbirth is considered 18 to 30, both for psychological and medical reasons. Young mothers, not having reached spiritual maturity and life experience, experience immense pressure at the time of pregnancy, delivery and postpartum period, and major difficulties in caring for the child and his upbringing. This is reflected in the development of the child and the environment in the family.

To the question, at what age are you planning to have children, majority of respondents (67.1%) answered 21-25, 13.2% indicated over 26 years (answers of boys- 23.7%), 12.6% said 18-20 and 5% had difficulties to answer (Fig. 43).

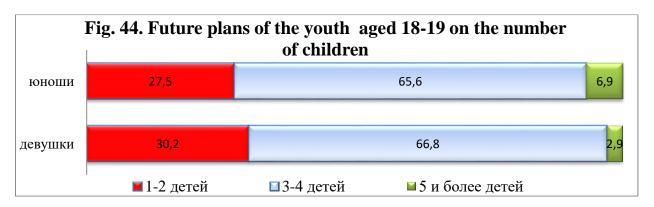


Answers differed across regions (Figure 44). 77,4% of respondents from Tashkent oblast want to have children at the age of or 21-25, while this indicator in Surkhandarya oblast is 69.8%, Andijan oblast -61.4%, Tashkent city -60.4%.



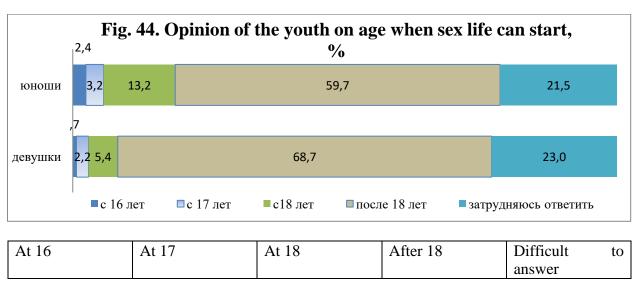
Data of Andijan oblast where 22.8% of the surveyed want to have children at the age of 18-20 is a cause for concern. In general, plans and intentions of the youth about optimal period of child birth are appropriate and this indicates relatively high level of awareness on reproductive health.

Questions were asked on the future plans for the number of children. Opinions of respondents on this matter are as follows: 66.3% want to have 3-4 children, 29.1% want 1-2 children, and 4.5% of respondents want 5 and more children.



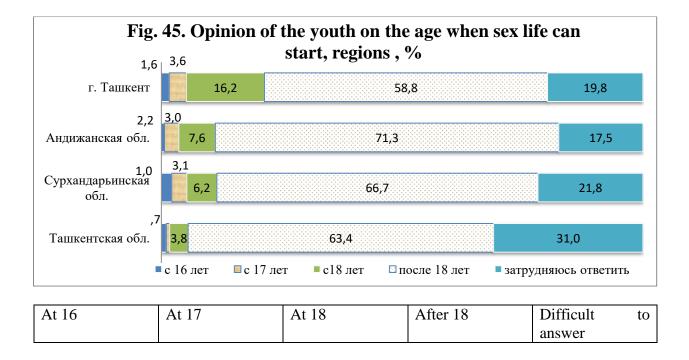
Optimistic mindset of most youth about having 3-4 children in a family may become the trend in to maintain demographic potential and population growth in the country at the recommended birth rate for simple replacement being 2.15 per family.

In general, earlier average age for the start of sex life of the youth is observed worldwide. To this end, graduates of vocational colleges and academic lyceums were asked questions, related to their opinions about optimal age to start sex life of the youth (Figure 45).



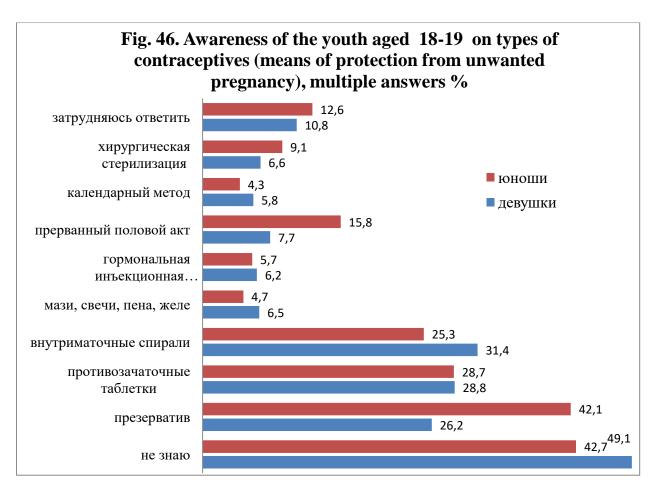
Majority of girls- 68.7% and 59.7% - boys believe that sex life can start after 18, after 18 13.2% of the boys and 5.4% of the girls demonstrate preferences of the youth to start sex relations. This circumstance requires serious consideration in the activities to promote reproductive health. Small number of respondents mentioned early start of sex life. Considering certain sensitivity of this question, the percentage of respondents, who had difficulties to answer this question was quite high (21-23%).

There are regional differences in answers of respondents (Fig. 45)



In Tashkent there is quite a high percentage of respondents, who believe that sex life can start at the age of 17-3.6% as well as at the age of 18-16.2% compared to other oblasts of the country. In many respects it is because of more advanced youth, more freedom in their behavior, having broad access to various information, inter alia, on Internet. In general, notably, majority of the youth are oriented to early sex life, which in many respect is defined by their physiological readiness.

At the same time, early sex life sometimes leads to unwanted pregnancy, particularly among the youth due to lack of knowledge and skills because of inadequate information provided at academic institutions in the area of reproductive health of the youth. Analysis of the awareness of the graduates of vocational colleges and academic lyceums randomly selected in the regions of the country indicated that there are a number of problems in this sector. (Fig.46)



| Difficult to answer |
|------------------------|
| Surgical sterilization |
| Calendar method |
| Withdrawal |
| Hormonal injection |
| Foam, gel |
| Intrauterine device |
| Contraceptive pills |
| Condoms |
| Don't know |

Quite sharp and problematic point is that approximately 49.1% of girls and 42.7% of boys don't know about various types of contraceptive, which indicates serious gaps in educational programs in the area of reproductive health of the youth at academic institutions of this profile.

More boys know about condoms (42.1%) than girls (26.2%). 15.8% of boys and 7,7% of girls know about withdrawal. One-third of respondents know about contraceptive pills, intrauterine devices. The youth are less informed on other types and means of contraceptives such as surgical sterilization, calendar method, hormonal injection contraceptive, ointments, suppositories, foam, gel, etc.

There are also regional differences in the level of awareness of the youth about contraceptives (Table 1).

Таблица 1

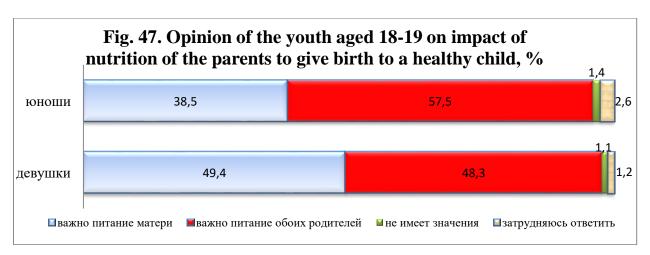
Level awareness of the youth aged 18-19 about contraceptives and means of protection from unwanted pregnancy, %

| | Tashkent oblast | Surkhandarya oblast | Andijan oblast | Tashkent city |
|---|--------------------|------------------------|-------------------|------------------|
| don't know | 49,8 | 51,1 | 58,1 | 27,3 |
| condom | 30,7 | 25,2 | 18,5 | 56,2 |
| Contraceptive pills | 24,4 | 27,4 | 20,1 | 42,9 |
| Intrauterine devices | 30,3 | 30,2 | 23,1 | 32,1 |
| ointments, suppositories, foam, gel | 5,6 | 5,9 | 3,6 | 7,8 |
| Hormonal injection contraceptive | 2,8 | 3,7 | 3,0 | 14,3 |
| withdrawal | 10,1 | 10,3 | 8,6 | 14,9 |
| Calendar method | 3,8 | 3,1 | 1,7 | 12,0 |
| Surgical sterilization | 5,9 | 5,6 | 3,6 | 15,3 |
| difficult to answer | 9,1 | 11,5 | 15,8 | 9,4 |

In the answers of the youth in the oblasts high level of ignorance of the (half of respondents) types of contraceptives and means of protection or unwanted pregnancy than in the capital of the country (27,3%). While over 56.2% of respondents in Tashkent were aware of condoms, in Andijan oblast it held merely 18.5% of the youth, etc. Also awareness of contraceptive hormonal injections and withdrawal is higher in Tashkent (14,3%) than oblasts on average 3% and 10%, respectively. The situation is similar as regards calendar method and surgical sterilization.

Rational nutrition is very important throughout pregnancy in order to maintain and strengthen the health of the mother and future child, which changes significantly with formation of fetus and child. To this end, for review of level of awareness on reproductive health were asked questions about importance of nutrition for future parents in order to give birth to a healthy child (Fig.47).

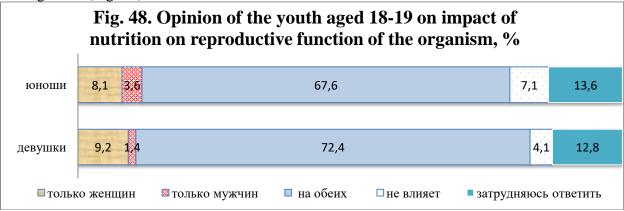
Obtained findings indicate that in general absolute majority the youth properly assess (96%) importance of nutrition in giving birth to a healthy child. Girls believe that nutrition of the mother (49.4%) facilitate health of the fetus to a greater extent than boys (38.5%).



| Mother's | | Nutrition of both | Doesn't matter | Difficult | to | |
|-----------|----|-------------------|----------------|-----------|----|--|
| nuttition | is | parents is | | answer | | |
| important | | important | | | | |

There are some differences across regions. For example, 40.1% of respondents from Tashkent oblast, 47.7% from Surkhandarya oblast, 55.4% from Andijan oblast and 36.4% Tashkent believe that nutrition of both parents are important to give birth to a healthy child, while 58.5% of respondents of Tashkent oblast, 48.0% from Surkhandarya oblast, 41.6% from Andijan oblast and 60.4% of Tashkent believe that it is only mother's nutrition that matters.

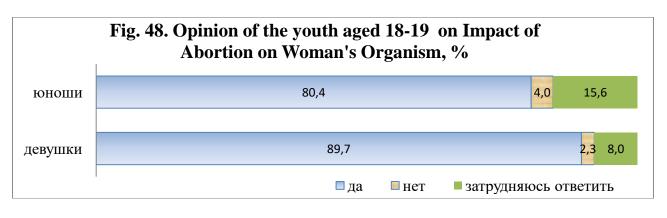
The youth were asked a question on the extent of impact of nutrition on reproductive function of the organism (Fig. 48).



| Only women | Only men | Both | Doesn't matter | Difficult | to |
|------------|----------|------|----------------|-----------|----|
| | | | | answer | |

Majority (70.5%) of respondents answered that nutrition influences the reproductive function both of men and women. 8.8% responded that it impacts the reproductive function of only women. Nutrition does not have any impact reproductive function, noted 5.3% of respondents.

Girls and boys were asked a question on the harm of abortions for woman's organism? Absolute majority of respondents (85.9%) answered yes, of whom 89.7% girls and 80,4% boys. Small part of respondents (3,0%) answered that it was not harmful due to their lower awareness.

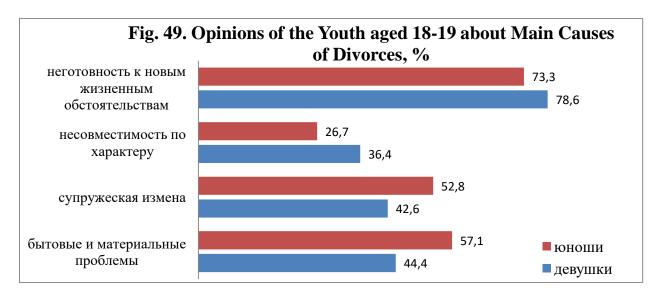


| Boys | | |
|-------|----|---------------------|
| Girls | | |
| Yes | No | Difficult to answer |

In 2016 29,400 divorces were registered in Uzbekistan and most often young people at the age of 20–25 dissolve their marriage. Government of the country is making major effort to this end and today there is a reconciliation commission under every mahalla committee in the country, which acts as an arbiter in family disputes of spouses and talk to them to save the family. Various organizations, inter alia, Council of Mothers-in-law were established to support young families.

In this study the opinions of the youth on the causes of divorces were explored by survey (Fig.49).

Following are the main causes of divorces in case of early marriages: lack of readines to new life circumstances and challenges (76.5%), financial and domestic problems, reported to a greater extent by boys (57.1%) than girls (44.4%), adultery over half of the answers by boys (girls 42,6%), incompatibility of characters (32.5%).



| Unpreparedness to new life circumstances |
|--|
| Incompatibility of characters |
| Adultery |
| Financial and household problems |

Survey of the youth indicated that amongst most important risks and threats, which have serious impact on the consciousness of the youth as well as sustainability of families, are information technologies and lack of control over their content, which enables unhindered access of children, the youth, and young families to different websites of dubious content on Internet, which corrodes national values and in many respects lead to divorces.

Thus, there are certain problems in the efforts for informing and educating the youth on the issues of preparedness to family life and marriage. In the answers of the youth aged 18-19 they indicated that most of them (80.4%) are not ready for family life that requires to be considered in formulation of government policies to inform not only educational institutions but also parents. The youth prefer to obtain most information in the area of reproductive health, of healthy lifestyle from health workers which is not done adequately today. Youth in general realize negative aspects of early marriages, importance of planning childbirth in more mature age, and optimal number of children. At the same there are problems related to adequate information and education in the issues of contraception, means of protection from unwanted pregnancy, structure, and quality of nutrition for birth of healthy child, etc. To this end, it is required to enhance information-related

efforts in aforementioned dimensions with consideration of the opinions and preferences of the youth.

CONCLUSIONS AND PROPOSALS

Conclusions

In the framework of implementation of Strategy of Actions, a range of activities are underway to nurture a healthy generation in Uzbekistan. A package of legislative and regulatory acts as well as enforcement documents for implementation of youth policy has been produced, the mechanism for regulating family and marital relations is being improved. National traditions, mentality and moral values of the youth are being safeguarded by the society.

Organizational structue of the health system enabling quality health services for the youth and reproductive health of population has been created in the country. Findings of the sociological study indicates:

- according to the opinions of the youth, mutual understanding, respective attitudes, feeling of protection and stability, respectful attitude to the parents of the spouse, financial well-being, comfortable home, children and health family members are key to happy and durable marriage;
- in young families parents play in important role in family life, mutual support of family members strengthens the relations and reinforce durability of the family to miscellanous socioeconomic problems. Co-habitation with parents enable to adopt local traditions and the experience of elder generation in nurturing sound family relations;
- most important risks and threats, which impact the sustainability of young families and significantly influence the mindset of the youth are активное penetration of information technologies, which enable unhindered access of children, the youth, and young families to different websites with dubious content on the Internet;
- as for the main sources of information on contraceptives, their types, methods of use and places of acquisition, respondents noted health workers (obstetrition-gynecologists, general practitioners, midwives, nurses at polyclinic) as well as colleagues, relatives, friends, spouses, etc. Extramarital sex activeness of the youth is minimal;
- irregularities in daily routine / time management and intake of meals by the youth identified. One-fifth of the youth at the age of 18-19 allocate merely 5-6 hours per day to sleep, which has negative influence on a young organism and can lead to different illnesses;
- there are problems with the quality of nutrition in the regions of the country. Not at all academic institutions technical facilities are place for preparing rational and balanced meals at canteens and buffets. Majority of of the youth eat dry foods such as fast food, hamburgers, lavash (shawerma), pastry etc.;
- high level of willingness of the youth to engage in sports, including girls. However, there is a need for qualified trainers, various sports inventory, affordability, expand the variety of sports and activities available, inter alia, at academic institutions;
- preventive check-ups are designed to detect the illness at early stages or predisposition to start preventive measures and timely treatment. However, it was identified that the rate of the youth attending periodic check-ups is low (31.2%) and that requires respective organizational steps.
- the efforts made in the area of leisure of the youth focused on development of intellectual and artistic abilities, including organizing sports contests, domestic tourism, youth events;
- high need and willingness of the youth in acquisition of higher education (boys 81,4%, girls 77.2%), which is traditional and typical for the mentality of population of the country. However, the number of admissions nationwide is clearly inadequate;
- the youth have the need for comprehensive and professional information. However, there is a shortage of highly-qualified faculty at academic institutions, low quality of textbooks and visual aids in the area of reproductive health;
- majority of teenagers don't know about sexually transmitted infections such as hepatitis A, B, C, D, chlamidiosis, herpes, and this required comprehensive information efforts for the

student youth. Some young people believe that a person can contract HIV/AIDS by use of public toilet (12.5%) and kisses (22.2% girls and 32.4% boys);

- Over 80% of the youth believe that early marriages are a big problem not only for the family but also for the society. At the same time, parents have the final say in the choice of spouse and timing of the marriage, and they do not always consider fully the interests of the youth;
- majority of the youth completing their study at vocational colleges and academic lyceums are not quite ready for family life. Many problems of young family couples are caused by psychological and physiological immaturity of spouses;
- low level of awareness on various types and means of contraception, inter alia, condoms, withdrawal, contraceptive pills, intrauterine devices. Extremely low level of awarenessof the prevention means such as surgical sterilization, calendar method, hormonal injection contraception, , ointments, suppositories, foam, gel, etc.

PROPOSALS

to further strengthen reproductive health of the youth:

- strengthen sanitary awareness efforts, inter alia on the issues of safeguarding reproductive health and of healthy lifestyle, promoting proper reproductive of behavior of population, particularly among socially vulnerable groups of population and the youth;
- it is essential to provide education in the area of reproductive health, starting from schools up to lyceums, vocational colleges, and universities. Information materials should be interesting for the youth utilizing innovative technologies;
- there is a need to significantly increase the number of lectures and seminars, roundtables and discussions inviting representatives of various health institutions. If required, separate sessions should be held for boys and girls.
- scaling up awareness-raising to implement the principles of setting up a healthy family, including preparation of the couple to pregnancy and delivery, enhancing awareness on use of contraceptives, informing on the needs to increase birth spacing;
- special focus on improving reproductive health of teenagers, scaling up information programs utilizing the media;

the efforts for prevention of HIV must be strengthend by further enhancing awareness primarily of the youth. To this end, engagement of the parents must be strengthened so that to turn them into one of the important sources of information on sexual and reproductive health for their children:

- continuous improvement of the skills of health workers counseling the youth in the area of reproductive health, inter alia, by organizing special curricula and lectures at vocational colleges and academic lyceums of the country;
- strengthening the efforts in the area of training the staff of health institutions, health workers of family polyclinics/SVPs, specialized centers on the issues of safeguarding the health of children and teenagers;
- development and provision of modern learning aids to nurses on particular features of counseling teenagers and the youth, quality handout materials, social advertising spots, short films;
- developing new training program on healthy lifestyle for senior grades of secondary schools as well as students of lyceums and colleges, with consideration of new data in the area of safeguarding the health of the youth, used approaches and modern pedagogical techniques;
- for support of nurses' work, consider opportunities to engage psychologists of the academic institutions among preliminari training programme for organization of the work with teenagers and the youth in the area of healthy lifestyle;
- develop special measures for medico-social rehabilitation and support of socially vulnerable youth as well as the youth with disabilities;
- introduce the practice of visual demonstration on harm of consumption of the large amunt of salt, sugar, fats, carbonated drinks, etc. at the classes;
- scaling up the activities to inform the youth entering the reproductive age on the following issues: care for pregnant women and children, support birth of healthy ребенка, increasing the period of breastfeeding and birth spacing, negative implications of marriages at early age and between close relatives, etc.
- boosting awareness-raising activities to promote gender equality considering traditions, mentality and values of family relations. Information programmes oriented on the youth should reflect the issues of rational distribution of roles in the family, optimization of responsibilities for upbringing of children, running a household;
- special attention should be focused on the leisure of the youth, scaling up the opportunities and mechanisms for active engagement in active learning forms of leisure, development of intellectual and artistic abilities of the youth by organization of sports contests, tourism, youth activities and campaigns;

More information resources in Uzbek related to men's health, reproductive health, for prevention of diseases as well as information on family relations, importance of family and child planning should be produced in the Uzbek segment of Internet;

- best practices in media coverage of the problems in the family and marriage should be scaled up. Growth in the number of projects focused on the youth on the subjects of relations of a husband and wife, children and parents involving the elderly, religious leaders, psychologists, health workers, teachers, etc.;
- organize special courses for parents of the youth for preparedness of the youth to family life, sexual relations. Parents play key role in upbringing of healthy young generation, particularly, it is relevant to fathers, who do not give adequate attention to the problems of their sons;
- work with young families on the issues of proper upbringing of children based on the principles of healthy lifestyle, importance of rational nutrition for normal growth and development of the child;
- instill the basic knowledge of healthy lifestyle and hygienic skills in children at pre-school institutions. Production of learning aids with pictures for pre-school-aged children for implementation of the basics of health culture;
- organize pre-nuptial training on the issues of family planning, maintenance of birth spacing, prevention of diseases, psychology of family relations;
- further scaling up of opportunities for enhancing the education of the youth by expansion of the quotas in admission to higher educational institutions, facilitating subsequent employment of g college graduates;
- Considering high authority of religious leaders, they should be engaged in the process of education and informing parents and the youth on the issues of preparedness to family life, mitigation of conflicts, tolerance and mutual respect in the family;
- in-depth sociological surveys should be expanded, which will enable to identify the data and trends in the area of reproductive health of the youth and strengthen factors of family relations, which cannot always be identified by a regular official statistics;

Questionnaire

Questions on Healthy Lifestyle and Safeguarding Reproductive Health of the youth»

Dear student! This questionnaire is anonymous and will not contain your personal data. We would like to ask you carefully read every question in the questionnaire and select the options of the answers, which are closest to reflecting your opinion. For some questions, where it is appropriate, several answers can be selected or your additional opinions and proposals can be indicated.

| LIFESTYLE | | | S |
|--|---|---|---|
| S.1. In your opinion, healthy lifestyle - это? (several answers can be selected) | a) Rejecting harmful habits (курения, алкоголя, etc.); b) Personal hygiene; c) Optimal physical activity throughout the day; d) Rational nutrition; e) Positive emotions; f) Engaging in physical education and sports; g) other | | |
| S.2. Do you follow daily routine? | | 1. Yes 2. N 3. Difficult to ans | |
| S.3. How much time do you allocate for sleep in a day (meaning night and daytime sleep)? | | 1. 5-6 hours 2. 7-8 hours | 3. 9-10 hours 4. 11-12 hours |
| S.4. How many times a day do you eat? | | 1. 1-2 times 2. 3 times | 3. 4 times 4. 5 pa3 |
| S.5. Indicate your time for intake of food (mostly)? | | 1. Breakfasthr. 2. Lunch hrs. | 3. Afternoon snack hrs. 4. Dinner hrs. |
| S.6. Are you satisfied with the quality on utrition? | f your | 1. Yes 2. No | 3. Partially4. Difficult to answer / no answer |
| S.7 Do you consider your nutrition he full-fledged? | ealthy / | 1. Yes 2. N 3. difficult to answ | |
| S.8. How do you assess the current state of your health? | | 1.good2. satisfactory3. Poor4.difficult to answer /no answer | |
| S.9. Do you do physical exercise to maintain your health? | | 1. Yes 2. No → S11 3. no answer → S11 | |
| S.10. How often do you do physical exert to maintain your health? | rcises | 1. Daily 2. 2-3 times per week | 3. Occasionally 4. I don't |
| S.11. Does your college / lyceu have adequate facilities physical education or sports? | | 1. Yes 2. No 3. difficult to answer | er / no answer |

| G44 **** | | | | |
|---|-----------|--|--|--|
| S12. What factors would facilitate your | | a) Nearby location of sports facilities; | | |
| engagement in sports? | | b) Affordable fees; | | |
| (several answers can be selected) | | c) More types of sports at lyceum / college; | | |
| | | d) More frequent classes in лицее/колледже; | | |
| | | e) Availability of qualified trainers; | | |
| | | f) Not interested in sports; | | |
| | | g) other | | |
| | | h) difficult to answer /no answer | | |
| | | a) lifestyle; | | |
| S.13. What do you think, which one of the | | b) special features of nutrition; | | |
| factors has the most influence on the | state of | • • • • • • • • • • • • • • • • • • • | | |
| your health? | | d) harmful habits; | | |
| (several answers can be selected) | | e) environmental situation; | | |
| | | f) financial status of the family; | | |
| | | g) sports; | | |
| | | h) other | | |
| | | i) difficult to answer /no answer | | |
| S.14. Do you follow the state of your health? | | 1. Yes 2. No → S16 | | |
| | | 3. difficult to answer / no answer → S16 | | |
| S.15. How do you look after your | a) Regu | ularly undergo medical checkups; | | |
| health? | b) Turn | to doctors upon onset of symptoms of disease; | | |
| (several answers can be selected) | c) Enga | age in prevention of diseases through sports, physical | | |
| | activity | / tempering; | | |
| | d) I take | e vitamins and herbs; | | |
| | e) othe | r | | |
| | f) diffi | cult to answer /no answer | | |
| , | | a) proper and timely nutrition; | | |
| done to safeguard one's health? | ŀ | b) seeking a doctor in timely manner; | | |
| (several answers can be selected) | (| c) physical education and sports; | | |
| | (| d) maintain balance of sleep and leisure; | | |
| | 6 | e) avoid overloads and exhaustion; | | |
| | f | f) give up smoking, alcohol and other habits; | | |
| | | g) difficult to answer /no answer | | |
| S.17. Do you think it is essential to i | | 1. Yes 2. No | | |
| fresh fruits, vegetables, juices? | | 3. Difficult to answer /no answer | | |
| , 8 , | | | | |
| S.18. How important is nutrition of | future | 1. Nutrition of the mother is important | | |
| parents for birth of a healthy child? | | 2. Nutrition of both parents are important | | |
| | | 3. Doesn't matter | | |
| | | 4. Difficult to answer /no answer | | |
| S.19. Does nutrition affect reprod | luctive | 1. Yes, only of women | | |
| function? | | 2. Yes, only of men | | |
| | | 3. Yes, both on women, and men | | |
| | | 4. Does not influence | | |
| | | 5. Difficult to answer /no answer | | |
| | | | | |

| S.20. From which sources do | you rece | ive a) I do no | ot receive info | rmation | |
|--|-----------------------|--|---|--------------------------------|--|
| information on rational nutrition? | | b) on Inte | b) on Internet; | | |
| (several answers can be selected) | | c) media: | c) media; | | |
| | | d) genera | l practitioners | • | |
| | | e) nutriti | onist; | | |
| | | f) mahall | la committees | | |
| | | · · · · · · · · · · · · · · · · · · · | lemic institution | ons: | |
| | | h) family, parents, relatives | | | |
| | | | | | |
| | | j) other_ | , acquintance | S | |
| | | J' | lt to answer /r | — answer | |
| S.21. What do you do or how | a) Latte | and theatre, cine | | h) I attend various courses; | |
| do you spend your free time? | b) I do : | | illa, | i) I read books, newspapers; | |
| (several answers can be | | sports, nd my time wit | h tha | j) I spend time with friends; | |
| selected) | | computer; | ii uic | k) I rest at home; | |
| selectea) | | p with housech | orac• | l) No free time; | |
| | | t Internet clubs | | m) other | |
| | · · | | , | | |
| | f) I visit a library; | | | | |
| g) I watch TV | | | a) Saametra | se training | |
| S.22. Do you attend training courses, which p | | | | | |
| you to family life and household? For exa | | example: | b) Culinary training | | |
| (several answers can be selected) | | | c) Patisserie training | | |
| | | | d) Nurse training | | |
| | | | e) Hairdress | _ | |
| | | | f) Masseuse | etraining | |
| | | | g) other | | |
| | | | h) No, I do r | _ | |
| S.23. Are you a member of Kamolot movement? 1. Yes 2. No | | | 1. Yes 2. No | | |
| S.24. Do you know the mandate of a) I don't know th | | | v the goals of t | this organization; | |
| | | b) Unification | of the youth; | | |
| (several answers can be selected) | | | e; | | |
| | | | ort in finding the worthy niche in the society; | | |
| | 6 | e) Comprehens | sive protection | of the interests of the youth; | |
| f) Or | | Organization of required facilities for complete unfolding | | | |
| | | intellectual and creative potential of the youth; | | | |
| | ١, | a) difficult to a | nswer /no ans | wer | |

| S.25. What are you planning to do | a) app | ply to a university; | |
|---|---|-------------------------------------|----------------------------------|
| after graduating from college / | b) get a job; | | |
| lyceum? | c) get married; | | |
| (several answers can be selected) | d) will start home-based work/business; | | |
| (Several answers can be selected) | | ll be helping with housel | |
| | | 1 0 | |
| | | ve not yet thought about | |
| | | the discretion of my pare | ents; |
| | | ner | |
| | i) dif | ficult to answer /no answ | ver |
| REPRODUCTIVE HEALTH | | | R |
| R.1. What is your understanding of | a) | ability to birth | d) state of complete physical, |
| reproductive health? | health | ny children; | intellectual and social well- |
| (several answers can be selected) | b) sa | tisfaction and safe sex | being; |
| | life; | | e) other |
| | c) | absence of illnesses | f)difficult to answer /no answer |
| | _ ′ | ments; | , |
| | 01 5111 | , | |
| R.2. From which sources do you | a)] | I do not receive informat | tion |
| receive information on reproductive | b) 1 | Internet; | |
| health? | c) ' | TV, radio; | |
| (several answers can be selected) | d) 1 | Newspapers, journals; | |
| | | Banners, posters, outdoo | or advertising: |
| | | Counseling at health cen | <u> </u> |
| | | Lectures and talks at ma | |
| | - | Lectures and courses at a | |
| | , | Family, parents, relative | |
| | | | 5 |
| | | Friends, acquintances | |
| | | other difficult to answer /no ar | |
| D 2 E | | | ISWEI |
| R.3. From which sources would you | a) Internet; | | |
| like to receive information on | , | V, radio; | |
| reproductive health and on healthy | c) Newspapers, journals; | | |
| lifestyle? | | anners, posters, outdoor | |
| (several answers can be selected) | | ounseling at health center | |
| | | ectures and talks at maha | |
| | - | ectures and courses at ac | cademic institutions; |
| | | amily, parents, relatives | |
| | · · | riends, acquintances | |
| | 37 | ther | |
| | k) di | fficult to answer /no ans | swer |
| R.4. Did you information on reproduct | tive | | 2. receive |
| health at school? | | 3. difficult to answer / | no answer |
| R.5. Does you college / lyceum offer cla | isses | 1. Yes | |
| on the issues of of healthy lifestyle and | | 2. No → R 11 | |
| reproductive health? | | 3. difficult to answer / | no answer → R 11 |
| R.6. If Yes, how many times per month | ı / | 1. // times per m | |
| annum? | | annum | r |
| | | | |
| R.7. What do you think, is the number | | 1. Adequate | |
| ofclasses on healthy lifestyle and | | 2. I'd like more | ary faw |
| reproductive health adequate? | | 3. Not adequate / Ve | |

| R.8. Are there textbooks or other aids | 1. Yes |
|--|--|
| available for this subject? (including for use | 2. No |
| at libraries) | 3. difficult to answer / no answer |
| R.9. Are you satisfied with the quality of | 1. fully satisfied |
| textbooks and visual aids? | 2. partially satisfied |
| | 3. were not satisfied |
| | 4. difficult to answer /no answer |
| R.10. On which subjects the classes on | a) Personal hygiene and prevention of diseases; |
| healthy lifestyle and reproductive health are | b) Psychology of relations with the opposite gender; |
| held? | c) Attitude of the youth to family values; |
| (several answers can be selected) | d) Maturity and readiness to family life; |
| | e) Sex and reproductive education; |
| | f) Contraceptives and prevention of unwanted |
| | pregnancy; |
| | g) Sexually transmitted infections; |
| | h) other |
| | i) difficult to answer / no answer |
| R.11. Are you interested in the sessions on | 1. Yes |
| the issues of of healthy lifestyle and | 2. No |
| reproductive health? | 3. Difficult to answer / no answer |
| R.12. To what extent are you familiar with | 1. Fully; |
| the problem of drug addiction among of the | 2. To some extent; |
| youth? | 3. Don't know at all; |
| | 4. Never was interested in these issues; |
| | 5. Difficult to answer /no answer |
| R.13. What do you think what are main | a) Early start of sexual relations; |
| causes of sexually transmitted | b) Frequent change of partners; |
| infections (STIs)? | c) Poor awareness of STIs; |
| (several answers can be selected) | d) Irregular use of the means of protection (condoms); |
| | e) other |
| | f) difficult to answer /no answer |
| R.14. What can be the consequences of STIs, | , , , , , , , , , , , , , , , , , , , |
| which were not diagnosed and treated in | a) They can cause serious complications of reproductive and urogenital system; |
| time? | b) They can cause serious chronic diseases of |
| (several answers can be selected) | reproductive and urogenital system |
| (several answers can be severed) | c) They can cause infertility both of girls and boys |
| | d) other |
| | e) difficult to answer /no answer |
| R.15. What do you think, how one can | a) Blood transfusion; |
| contract HIV infection/AIDS? | b) using public toilet; |
| (several answers can be selected) | c) by a kiss; |
| | d) unprotected sex between man and a woman; |
| | e) using non-sterile syringes and needles; |
| | f) getting manicure, pedicure or haircut; |
| | g) using common utensils with HIV / AIDS patients; |
| | h) in treatment of teeth or surgical intervention |
| | i) difficult to answer /no answer |

| R.16. What types of contraceptives (means | a) don't know |
|---|--|
| of protection from unwanted pregnancy) do | b) condom |
| you know? | c) contraceptive pills |
| (several answers can be selected) | d) intrauterine devices |
| | e) ointments, suppositories, foam, gel |
| | f) injected hormonal contraception |
| | g) withdrawal |
| | h) calendar methods |
| | i) surgical sterilization |
| | j) other (please, indicate) |
| | k) difficult to answer /no answer |
| R.17. What do you think, at what age sex life | 1. 16 |
| can start? | 2. 17 |
| | 3. 18 |
| | 4. after 18 |
| | 5. other |
| | 6. difficult to answer /no answer |
| ATTITUDE TO MADDIACE | T 7 |
| ATTITUDE TO MARRIAGE | V |
| V.1. Do you consider yourself ready for | 1. Yes 2. No |
| family life ? | 3. difficult to answer / no answer |
| | |
| V.2. Has anyone informed / prepared you | 1. Yes 2. No →V4 |
| for family-matrimonial relations? | 3. difficult to answer /no answer → V4 |
| | |
| V.3. If yes, then, who informed / prepared | a) parents; |
| you for family-matrimonial relations? | b) relatives; |
| (several answers can be selected) | c) friends, acquintances; |
| | d) academic institutions; |
| | e) health workers |
| | f) self-education (books, TV, Internet); |
| | g) other |
| | h) difficult to answer /no answer |
| V.4. What do you think, who should prepare | a) parents; |
| the youth to family life? | b) relatives; |
| (several answers can be selected) | c) friends, acquintances; |
| | d) teachers, mentors; |
| | e) health workers; |
| | f) personally, books, literature, Internet; |
| | g) other |
| | h) difficult to answer /no answer |
| V.5. What do you thin, what age is most | 1. girls in // years |
| favorable for a marriage? | 2. boys in // years |
| V.6. What do you think of early marriage, | 1. I condemn it; |
| before the age of 18? | 2. I believe it is everyone's personal choice; |
| | 3. I think earlier the better; |
| | 4. This problems does not concern me; |
| | 5. other |
| TIMES ALLEY A | 6. difficult to answer /no answer |
| V.7. Do you think that early marriage is a | 1. Yes 2. No |
| problem in modern society? | 3. difficult to answer / no answer |
| | |

| V.8. What do you think, what is the main | a) it is historical traditions of the people; | | |
|--|---|--|--|
| cause of early marriages, i.e. marriages | b) early love, pregnancy; | | |
| under 18? | c) discretion of parents along with a good candidate | | |
| (several answers can be selected) | (groom); | | |
| | d) Concern of parents for moral behavior of children; | | |
| | e) other | | |
| | f) difficult to answer /no answer | | |
| V.9. In your opinion, does early marriage | a) Deprivation of childhood; | | |
| have negative impact on subsequent life? | b) Limiting personal freedom; | | |
| (several answers can be selected) | c) Education; | | |
| | d) Employment; | | |
| | e) Health | | |
| | f) Difficult to answer /no answer | | |
| V.10. In your opinion, does early marriage | 1. Yes 2. No | | |
| increase the risk of divorce in near future? | 3. difficult to answer / no answer | | |
| V.11. What are main causes of divorces, in | a) Social and financial problems; | | |
| your view? | b) Adultery; | | |
| (several answers can be selected) | c) Incompatibility; | | |
| | d) Lack of preparedness to new life circumstances; | | |
| | e) other | | |
| | f) difficult to answer /no answer | | |
| V.12. At what age are you planning to have | 1. Under 18 | | |
| children? | 2. 18-20 | | |
| ciniuren: | 3. 21-25 | | |
| | 4. After 26 | | |
| | 5. Other | | |
| | 6. difficult to answer /no answer | | |
| V.13. How many children in the family | | | |
| would you like to have? | children | | |
| V.14. What do you think, is abortion | 1. Yes. 2. No | | |
| harmful for woman's organism? | 3. difficult to answer /no answer | | |
| Ç | | | |
| SOCIODEMOGRAPHIC CHARACTERISTIC | S A | | |
| A.1. Please, indicate your age (full years) | years | | |
| • | · | | |
| A.2. Where and with whom do you currently | 1) with parents in an apartment with amenities; | | |
| live? | 2) with parents in a private house (with a yard); | | |
| | 3) dormitory; | | |
| | 4) rented home; | | |
| | 5) other | | |
| A.3. How do you currently make a living? | a) at the expense of their parents | | |
| (you can choose from several options of the | b) I work full-time /part-time to generate additional | | |
| answer) | source of income. | | |
| , | | | |
| | | | |
| | d) difficult to answer /no answer | | |

| | Father: 1. Higher |
|---|---|
| A.4. Education of your parents? | 2. Secondary special; |
| | 3. Secondary; |
| | 4. No education; |
| | 5. Don't know; |
| | 6. No father |
| | Mother: 1. Higher |
| | 2. Secondary special |
| | 3. Average |
| | 4. No education |
| | 5. Don't know |
| | 6. No mother |
| | Father: 1. Worker / peasant; |
| | 2. White-collar (academic, intelligentsiya, |
| | military); |
| | 3. Entrepreneur/farmer; |
| | 4. Temporarily unemployed |
| A.5. What do your parents do? | 5. other |
| A.S. What do your parents do: | Mother: 1. Worker / peasant; |
| | 2. White-collar (academic, intelligentsiya, |
| | military); |
| | 3. Entrepreneur/farmer; |
| | 4. Temporarily unemployed |
| | 5. Other |
| A.6. How do you assess the well-being of your | 1. High (affluent) |
| family? | 2. Above average (Upper-middle) |
| | 3. Average (Middle) |
| | 4. Below average (Lower-middle) |
| | 5. Low-income |
| A 7 What land and a second of the second of | 1 |
| A.7. What language do you speak at home? | 2 |
| A & Please indicate your gender | 1. Female |
| A. 8. Please, indicate your gender | 2. Male |

THANK YOU FOR TAKING PART IN THE SURVEY!

| You can leave your comments and | proposals hara |
|----------------------------------|----------------|
| I ou can leave your comments and | proposais nere |