

## Response to the EACEA Review Report and Review Letter

Project: ERASMUS+ 101134732 — WHGD

### Executive Summary

World Youth Alliance Europe submits this response to the EACEA Review Report and Review Letter concerning the project *Women's Health Goes Digital* (GAP 101134732-1). The Review Report raises a series of factual, methodological, and legal concerns regarding three deliverables and the project's alleged alignment with EU values. After careful examination, WYAE concludes that these concerns stem from misunderstandings of the Grant Agreement, misinterpretations of project content, and inappropriate reliance on non-binding political documents as de facto legal standards.

All project activities and deliverables fully comply with the Grant Agreement, including Article 14. The project demonstrably promoted inclusion, diversity, and nondiscrimination; reached multilingual and refugee communities; and delivered medically accurate, legally grounded training materials. The Review's objections repeatedly impose expectations that are not present in the Grant Agreement, such as mandatory coverage of specific SRHR topics, the requirement to adopt particular ideological frameworks, or the outright false claim that WYA did not deliver a youth-led project. Namely, all of WYA's staff and members who participated in implementing the project activities, helped co-design them or attended the events that are part of the project are aged under 30 and all of WYA's materials and activities are by definition youth-led and aimed at youth. As a youth organization, this prerequisite is part of our Charter.

This response clarifies the scope of each deliverable, corrects factual inaccuracies in the Review, and reaffirms that the project's philosophical and anthropological perspectives fall squarely within the pluralism protected by EU law, including the Charter of Fundamental Rights which in Art. 2 entitled Right to life states that "Everyone has the right to life" and the principle of equality between women and men, as enshrined in Article 2 TEU. WYAE remains committed to the integrity of the project and to the respectful, legally grounded promotion of women's mental and reproductive health across Europe.

### Introduction

World Youth Alliance Europe (WYAE) is responding to the European Education and Culture Executive Agency Review Report and associated letter that it received on November 3rd, 2025. WYAE remains committed to implementing the project Women's

Health Goes Digital in full accordance with the Grant Agreement GAP 101134732-1 and with the values listed in Article 2 TEU.

This response addresses the Review Report's findings regarding three specific deliverables, as well as broader legal concerns and factual inaccuracies. WYAE maintains that all deliverables comply fully with the Grant Agreement, including Article 14, and that the concerns raised in the Review Report stem from incorrect assumptions regarding the nature of EU values, the scope of Article 14, and the permissible range of viewpoints within EU-funded educational programs.

### **Procedural and Legal Observations**

Article 14 does not require beneficiaries to align project content with non-binding resolutions, political preferences, or specific ideological interpretations of sexual and reproductive health and rights. Instead, Article 14 requires:

1. Respect for human dignity, freedom, democracy, equality, the rule of law and respect for human rights (Article 14.1).
2. That the beneficiaries themselves do not engage in illegal activity or discrimination (Article 14.2).
3. That the project activities promote inclusion, diversity, tolerance, and non-discrimination (Article 14.3).

The Review Report repeatedly references political documents that do not possess binding legal status. EU values under Article 2 TEU are legal principles, not policy positions. The Agency cannot introduce additional obligations beyond the Grant Agreement by relying on resolutions without legal force.

Furthermore, EU values include freedom of thought, conscience, opinion and expression (Article 11 Charter), freedom of association (Article 12 Charter), and respect for cultural and philosophical diversity (Article 22 Charter). These rights protect the legitimate expression of philosophical and scientific frameworks concerning human dignity, relationships, fertility, health literacy, reproductive health and related scientific and moral questions.

EU values under Article 2 TEU are binding because they appear in the Treaties. By contrast, documents such as European Parliament resolutions, Commission communications, or Council conclusions express political priorities but do not create legal obligations. They cannot retroactively amend a Grant Agreement, redefine beneficiaries' duties, or impose specific ideological frameworks onto project deliverables.

The Agency's interpretation effectively converts non-binding political documents into compulsory standards, thereby narrowing the pluralism that EU law explicitly protects. WYAE disagrees with this approach. Beneficiaries cannot be required to adopt every policy preference found in EU communications, nor can deviations from non-binding texts be treated as non-compliance with Article 14. EU law protects a diversity of educational perspectives, philosophical viewpoints, and scientific emphases, provided they remain non-discriminatory and respect human dignity.

Educational content reflecting anthropological or philosophical viewpoints, or science and evidence-based information, does not constitute discrimination and cannot be deemed a breach of EU values. The Grant Agreement does not require alignment with any single approach to sexuality education, reproductive rights, or public health advocacy.

## **Factual Corrections Regarding Project Implementation**

### *1. Participant diversity and inclusion mechanisms*

The assertion in the Review Report that the project lacked inclusivity is contradicted by the Technical Report, which documents a clear and intentional effort to include diverse participants and ensure accessibility across linguistic, cultural, and social contexts. WYAE not only acknowledges that implementing a multilingual project across the EU posed challenges, but also demonstrates how these were identified and effectively addressed. As stated in the Technical Report:

“Multilingual Content Creation: Creating content for diverse European audiences in multiple languages presented logistical challenges. This was addressed by adopting a decentralized approach, with partners creating content in their native languages for local networks, while key content was translated into English for broader dissemination.”  
(Technical Report, Challenges and Solutions)

This approach ensured that project information and educational materials were not restricted to English speaking audiences. Instead, each partner adapted dissemination to their own national context, making the project genuinely accessible across multiple linguistic communities. The Agency's suggestion of limited inclusivity overlooks this explicit decentralised multilingual strategy.

Moreover, the project's activities themselves reached a highly diverse audience. The Warsaw training, described in detail in the Technical Report, dedicates an entire day to the situation and needs of Ukrainian refugee women in Poland, addressing trauma,

disrupted reproductive health patterns, and the obstacles these women face in accessing care (Technical Report, pp. 1 to 4).

The project partners include PONTES, whose core mission is the integration and empowerment of migrant and refugee women. This partnership ensured that the project did not merely include vulnerable populations at the margins but placed their needs at the center of several training sessions.

These elements collectively show that the project not only complied with Article 14.3 of the Grant Agreement, which calls for the promotion of inclusion, diversity, tolerance, and equality, but in fact demonstrated best practice in reaching multilingual communities and vulnerable groups. The diverse participation base, the focus on migrants and women affected by war, and the multilingual dissemination strategy all confirm that the project fulfilled both the content and the spirit of the inclusion requirements.

## *2. Clarification about WYAE membership and participation*

The Review Report repeatedly suggests that WYAE's membership criteria somehow affect the inclusivity of the project. This implication is factually and contractually incorrect. The Grant Agreement regulates *project participation*, not the internal membership structures of beneficiaries. Nothing in Article 14 or any other provision links eligibility for participation in Erasmus funded activities to the membership rules of the coordinating organization.

In practice, WYAE ensured that participation in all project activities was entirely open, public, and independent of any affiliation with the organization. The Technical Report documents workshops, trainings, press calls, dissemination activities, and local implementations that were accessible to youth workers and young women regardless of their background, personal beliefs, or worldview. At no point were participants required to subscribe to any philosophical position, sign any charter, or become members of WYAE or any partner organization. The Review Report provides no evidence to the contrary, nor does it identify any instance where a participant was excluded or discouraged on the basis of belief or identity.

The attendance lists and activity descriptions demonstrate diversity in national origin, cultural background, migration status, and organizational affiliation. For example, the Warsaw mobility included youth workers from multiple EU countries and incorporated sessions designed specifically around the experiences of Ukrainian refugee women, who were involved as beneficiaries and not as members of any participating organization.

Similarly, the Pamplona and Brussels events drew from the networks of all partner institutions, each of which brought participants from their own communities without

requiring or checking for WYAE membership. It is therefore misleading for the Review Report to suggest that the existence of philosophical criteria for joining WYAE as an organization member has any bearing on whether young people can participate in the WHGD project. These two spheres are entirely separate. Membership is voluntary, unrelated to project activity, and irrelevant to eligibility to participate in project activities. What matters under the Grant Agreement is whether project activities were open, accessible, and non-discriminatory. The evidence shows that they were.

Articles 14.2 and 14.3 require respect for EU values, including non-discrimination and openness. WYAE met these obligations by ensuring public access to all activities, welcoming participants from diverse backgrounds, and focusing the project on youth workers and young women in vulnerable situations rather than on organization members. The Review Report's concern conflates organizational identity with project implementation. The Grant Agreement does not support that conflation, and the factual record contradicts it.

In short, membership structures played no role in participation, and project participation remained inclusive and non-discriminatory throughout implementation.

### **Response to Specific Objections to Each Deliverable**

*D1: Handbook with best practices, approaches and methodologies organisation in implementing programs in the field of women's mental and reproductive health and rights*

According to the Grant Agreement, the Handbook of Best Practices is the principal output of Work Package 1, whose purpose is to collect, systematize, and present the methodologies, approaches, and programs already implemented by partner organizations in the field of women's mental and reproductive health and rights. The deliverable is therefore conceived as a mapping tool: it aims to document the practices partners bring into the project, not to invent new ones or to present an exhaustive catalogue of all practices existing within the EU. Annex 1 of the Grant Agreement explicitly states that WP1 will "gather existing approaches and methodologies from partners as a basis for program development".

The deliverable itself reflects this purpose. The Handbook of Best Practices is structured as a descriptive compilation of eight programs that partners currently run or have developed over time. It does not present these practices as universal standards, nor does it make prescriptive claims. Instead, it describes the origins, content, methodologies, and educational or medical basis of each program. These include mental health programs, trauma support and personal development courses, migrant integration initiatives,

fertility literacy programs, university level academic instruction, logotherapy, and medically grounded reproductive health programs such as FEMM. The Handbook makes clear in its introduction that it is a showcase of what partners are already doing, serving as a foundation for the training methodology that will be developed later under WP2.

Against this background, the Review Report's objection that the Handbook presents "one sided methods" misunderstands the nature of the deliverable. A best practices compilation is, by definition, descriptive rather than normative. It captures the lived methodologies of the partner organizations as they exist; it is not designed to represent all possible methodologies in Europe, nor to achieve an externally imposed ideological balance. The selection of programs arises from partner expertise. To require partners to include programs they do not run, or to align the Handbook with a preselected political or policy framework, would contradict WP1's purpose as defined in the Grant Agreement.

The Review Report raises concerns about the presentation of certain programs in the Handbook, particularly Teen STAR, the summary of Dr. Miguel Ángel Martínez's research, and a participant's personal feedback regarding contraceptive use.

The assertion that "intellectual rigour would require a critical presentation of all scientifically or philosophically based points of view" reflects a misunderstanding of what this deliverable is meant to achieve. The Handbook was never conceived as a comprehensive academic review or as a neutral comparative analysis of every existing approach to reproductive health. Under the Grant Agreement, Work Package 1 had a very specific and limited purpose: to document the programs, methods, and approaches that the partner organizations already employ in their work. It is, in essence, a descriptive compendium of lived practices, not a theoretical textbook.

The "intellectual rigour" standard invoked by the reviewers would be appropriate for an academic monograph or a university curriculum, but it is misplaced here. WP1 did not call upon partners to critique their own programs or to juxtapose them with every alternative methodological framework. It called upon them to present, faithfully and transparently, the practices they currently implement. The Handbook accomplishes exactly that.

The Review Report cites several phrases from the Teen STAR description as evidence of bias, yet these quotations simply reflect the nature of the program itself. Teen STAR is not an ad hoc creation of the consortium; it is an established emotional-sexual education program with decades of international use, including in several EU Member States. Its pedagogical framework is well known: it emphasizes emotional maturation, self-knowledge, responsible decision making, and a holistic understanding of fertility and sexuality. The Handbook merely summarizes these features because that is the function

of a best practices document. It is not offering Teen STAR's philosophy as the normative standard for the WHGD project, but accurately reporting what one partner organization already uses in its own educational work.

The Review Report's concern that Teen STAR promotes abstinence, values chastity, or encourages young people to develop self-mastery is, in context, misplaced. These elements are simply part of Teen STAR's established educational philosophy. More importantly, there is nothing in EU law, the Grant Agreement, or Article 14 that prohibits an educational program from promoting these values. Abstinence, self-discipline, and reflective decision making are legitimate components of many youth education programs across Europe. The presence of these values does not render a program biased; it reflects the diversity of pedagogical approaches that exist within a pluralistic society.

The same applies to the statement that instructors "must believe in the program's values". Far from being unusual, this is characteristic of many pedagogical approaches. This requirement does not transform these programs into ideological instruments; it simply ensures methodological consistency.

The Review Report also takes issue with the section of the Handbook summarizing research presented by Dr. Miguel Ángel Martínez, noting in particular his explanation that life begins at fertilization and his discussion of Natural Family Planning as an effective method. A scientifically grounded understanding of fertilization is essential in any discussion of reproductive health. The Review Report's objection to the statement that "life begins at fertilization" overlooks that this is not a philosophical assertion, nor a religious claim, nor an ideological position. It is a basic embryological fact taught in standard medical textbooks used across EU Member States.

According to the science of human embryology, the process of fertilization results in the formation of a new, genetically distinct human organism, marking the beginning of human biological development. As every first-year medical student learns, when the sperm and oocyte fuse, they give rise to a zygote that constitutes the beginning of a new human being, with its own chromosomal and molecular identity. This is the foundational definition that underpins all subsequent explanations of early embryonic development and is not contested in scientific literature.

Similarly, the presentation of Natural Family Planning as an effective method is grounded in decades of research on the physiology of the ovulatory cycle, hormone variation, cervical mucus biomarkers, and basal body temperature patterns. Explaining these mechanisms in an educational program does not exclude or diminish the reality of other methods; it simply conveys medically accurate information about the biology of fertility.

These topics appear routinely in medical, midwifery, and nursing curricula throughout Europe.

The Review Report's critique of the reference to students who chose to discontinue contraceptive use or to adjust their relationship dynamics profoundly misinterprets what the Handbook reports. The passage does not describe a program goal, policy preference, or expected outcome. It simply conveys feedback shared voluntarily by some participants, illustrating how the information they received influenced their personal choices. In the context of reproductive health, such choices are not only legitimate but expressly protected: informed consent and informed decision making are foundational principles of modern reproductive health care. It is a core tenet of EU health ethics that every person has the right to make autonomous decisions about their own body, their contraceptive use, their relationships, and their fertility intentions.

To suggest that reporting these decisions is "biased" misunderstands the fundamental nature of reproductive autonomy. A participant has the same right to decide to discontinue contraception as another participant has to begin or continue using it. Both are expressions of personal agency. The role of an educational program is not to steer individuals toward a predetermined choice, but to provide accurate information so that each person may make decisions aligned with their values, medical needs, and circumstances. The Handbook does exactly this: it reports, descriptively, that some participants exercised their right to make a different contraceptive or relational choice after gaining new knowledge.

Far from evidencing bias, the acknowledgment of such feedback demonstrates respect for autonomy and for the diversity of legitimate outcomes that informed choice can produce. What matters is that individuals are empowered to make decisions freely, consciously, and with access to full and accurate information. Reporting that this occurred in practice is entirely consistent with best pedagogical practice.

The Review Report's attention to the statement that Dr. Martínez "advocated for NFP as an effective method for conscious procreation, aligning sexual activity with the fertile phase of the cycle" appears to assume that simply describing a program's positive assessment of Natural Family Planning is somehow improper or ideologically charged. Nothing in the Handbook suggests that.

Further, fertility awareness-based methods are part of mainstream reproductive health education in many countries. They are widely used, medically recognized, and researched within European academic institutions.

*Deliverable D2.2: Training Program and Methodology*

According to the Grant Agreement, Deliverable D2.2 is defined as a “Training program and methodology for informing and educating girls and young women on women’s mental and reproductive health and rights.” It is part of Work Package 2, which aims to strengthen the capacity of youth workers and create a structured, evidence-based educational curriculum to be implemented across the consortium’s partner countries.

The Grant Agreement does not prescribe a specific ideological framework or require alignment with any single model of sexuality education. It requires that the material must address women’s mental and reproductive health, be educational in nature, and be implemented in line with Article 14’s general obligations to respect human dignity, non-discrimination, and EU values.

The deliverable itself fulfils this mandate precisely. The “Training Program and Methodology” document presents a structured curriculum consisting of fifteen comprehensive modules addressing the core themes identified in the Description of the Action: reproductive health literacy, anatomy and physiology, sexually transmitted infections, reproductive rights under EU and international law, informed choice, access to health care across EU countries, mental health, menopause, family planning and infertility services, gender equality, and a detailed review of contraceptive methods and their mechanisms. The document is methodological as well as educational, providing learning objectives, pedagogical approaches, suggested activities, and guidance for implementation by youth workers. It is built to be adaptable to different national contexts, in line with the cross-cultural nature of the consortium described in Annex 1 of the Grant Agreement.

In contrast, the Review Report presents a reductive interpretation of this deliverable. Rather than evaluating the full structure of the curriculum, the reviewers fixate almost exclusively on the fact that the program includes informed consent regarding fertility education, and clinical applications for medical care to treat underlying and root cause symptoms. The Review Report characterizes the deliverable as “one sided” or “biased,” not because it omits contraceptive information, but because it includes material that the experts personally consider outside of a preferred sexual education model. It is important to stress that the Review Report does not claim that the curriculum omits hormonal contraception or standard methods; rather, it assumes that the mere presence of alternative approaches is incompatible with “comprehensive” education. This is a substantive mischaracterization of what the deliverable is and what it is contractually obligated to contain.

Discussing the side effects of hormonal contraception, or presenting alternatives such as fertility awareness methods or behavioral approaches, does not constitute misinformation. These are legitimate components of reproductive health education and

are included in many public health curricula across the EU. Presenting the full range of available options, their benefits, limitations, and potential risks is part of delivering balanced and evidence-based education. It allows young women (and men) to understand not only commonly promoted medical choices but also approaches that may align better with their personal, cultural, medical, or psycho-social circumstances.

The standard of care in reproductive health is shifting. As the evidence base grows, educational and clinical care must change to address research advances, knowledge, and technologies. The deliverable emphasized these advances in reproductive health, which empower women to understand their bodies and health, to identify normal and abnormal hormonal changes, to understand the link between hormones and health, including mental health, and to have the knowledge to seek medical doctors and care who can diagnose and treat underlying hormonal imbalances in order to restore health. Providing such knowledge is part of informed consent. Moreover, our approach is inclusive, ensuring that the most up-to-date science can be accessed and provided to all, women and men alike, migrants and refugees, single women (emphasized within the report for no understandable reason), and women of every age and walk of life. We offer a broader set of tools for understanding reproductive health, which is consistent with the project's stated goals of increasing health literacy and informed decision making. To characterize such inclusion as a form of disinformation is to conflate scientific completeness with ideological deviation.

A careful reading of the curriculum shows this claim of disinformation to be unfounded. The modules present hormonal contraception, its mechanisms, efficacy rates, side effects, and clinical considerations. They also explain non hormonal methods, fertility awareness methodologies, medical approaches that diagnose and treat root cause hormone imbalances, and behavioral options such as abstinence and adoption. The curriculum therefore expands the range of information available to youth workers and young women rather than narrowing it. Presenting multiple approaches is fully consistent with educational pluralism and with the project's stated aim to develop "innovative training programs" offering "reliable information" and "holistic perspectives on reproductive health".

The Review Report's objection that the inclusion of alternatives to hormonal contraception is "ideological" overlooks the fact that fertility awareness-based methods and diagnostic techniques are recognized, medically valid, and widely practiced throughout Europe. These approaches are not prohibited anywhere in the Grant Agreement, nor in EU law. Nothing in Article 14 requires the beneficiary to promote only one public health framework or to omit approaches that do not align with specific non-binding resolutions cited by the reviewers.

The Review Report further criticizes the deliverable for not including content related to sexual orientation or LGBTQ+ issues. Yet this criticism again imposes expectations that do not exist in the Grant Agreement. The project is focused specifically on women's mental and reproductive health. It is not designed as a universal sexuality education program addressing all possible audiences, issues or categories. The absence of certain content is not an omission; it reflects the project's defined thematic scope. Evaluating the deliverable against criteria outside the Grant Agreement exceeds the bounds of contractual review.

The Review Report raises two further criticisms regarding the thematic scope of the curriculum: first, that abortion appears only once in a legal context and is not the subject of a dedicated lesson; and second, that gender is presented in a binary way without reference to LGBTQ+ persons or single women. Both criticisms misinterpret the scope of the deliverable as defined in the Grant Agreement and misunderstand the nature of the training program itself.

The Review Report notes that the term "abortion" appears only once in Module 5, in the section discussing the legal framework for the right to health in the EU, and concludes from this that the curriculum is incomplete or biased. This conclusion overlooks the purpose of the training program. Within this framework, the curriculum appropriately situates abortion, where it is one aspect and is legislated differently across Member States in the EU.

The absence of a dedicated lesson on abortion is therefore not an omission, but a reflection of the educational - and inclusive - intent of the program. The training program focuses on equipping youth workers with skills in literacy, physiology, mental health, and informed decision making, all of which are neutral, non-political components of reproductive health education. Abortion is not listed anywhere in the Work Package description or in the objectives of D2.2 as a required topic, and no part of the Grant Agreement mandates a full instructional module on it. The curriculum includes accurate references where relevant, in compliance with Article 14 and with the requirement that project outputs remain aligned with the project description.

To demand extended treatment of abortion where the Grant Agreement does not require it would be to impose additional conditions retroactively. The curriculum's approach therefore remains legally and pedagogically adequate.

The Review Report further criticizes the curriculum for referring to gender in binary terms, noting that it speaks of "women" and "men" and does not include explicit content on LGBTQ+ persons or on the reproductive rights of single women. This criticism misunderstands both the legal framework governing EU values and the scope of the

project itself. Article 2 TEU, which is the Treaty provision defining EU values, explicitly identifies “equality between women and men” as the relevant expression of gender equality within EU primary law. The language used in the curriculum therefore aligns precisely with the terminology employed by the Treaties and reflects the legally defined scope of gender equality in EU foundational principles. Furthermore, the Review Report criticisms regarding “single women” are both absurd and derogatory. “Single women” are not a class to be identified for different educational or biological/medical treatment. Their rights to informed consent, information, and the highest attainable health and medical care are the same as all women, and are recognized fully in the deliverables of this grant.

The WHGD project is focused on women’s mental and reproductive health, with a particular emphasis on young women facing disadvantages, including migrants and refugees, as set out in the Description of the Action and Annex 1. It is therefore both appropriate and compliant with the Grant Agreement that the curriculum refers to women and men in the way that EU law itself does.

When read in full, the “Training Program and Methodology” is a comprehensive, scientifically grounded, and pedagogically coherent resource. It aligns precisely with what the Grant Agreement requires: an educational program addressing women’s mental and reproductive health and rights, incorporating multiple dimensions of health literacy, and providing youth workers with tools to deliver informed, context sensitive sessions. The Review Report’s objections rest on a selective interpretation of the curriculum and on criteria that were never included in the contractual obligations of the project.

#### *Deliverable 2.3: Report on Training for Youth Workers*

Deliverable D2.3 is the official report documenting the three-day training for youth workers held in Warsaw from January 16 to 18, 2025. According to the Grant Agreement and Work Package 2, this deliverable is meant to provide a record of the training methodology, content, sessions, speakers, and outcomes, serving both as a proof of implementation and as a resource for partners preparing to replicate training in their own national contexts.

The report itself fulfils this purpose exactly. It describes in detail the sessions delivered by medical professionals, psychologists, youth workers, and specialists working with migrant and refugee women. The content covered a wide range of topics: reproductive physiology, hormonal health, mental health challenges, trauma recovery in displaced populations, perinatal care, fertility awareness, the menstrual cycle, informed decision making, access to reproductive health services in different EU countries, and the challenges faced by women fleeing war. The Technical Report reinforces this by noting

that the training aimed to equip youth workers with practical tools, culturally sensitive approaches, and medically accurate information relevant to women's mental and reproductive health.

The reviewers object: "It is regrettable that the issues of rape, contraception and abortion were not addressed." This criticism imposes expectations that do not appear anywhere in the Grant Agreement or in the Description of the Action. WP2 defines the training as focusing on women's mental and reproductive health, a broad category that includes physiology, hormonal health, mental well-being, stress, cycle literacy, and access to care. It does not require specific coverage of topics such as rape or abortion.

In fact, the training did address trauma and violence. Several sessions focused explicitly on the psychological impact of war, displacement, and sexual violence on Ukrainian women, including the difficulty of accessing reproductive health support while fleeing conflict. These discussions are squarely within the scope of "women's mental and reproductive health," and they show that trainers took violence against women seriously.

The next objection is that "not mentioning contraception or abortion risks creating misinformation by omission." According to the Commission Communication on Tackling online disinformation: a European Approach (COM/2018/236), "Disinformation is understood as verifiably false or misleading information that is created, presented and disseminated for economic gain or to intentionally deceive the public, and may cause public harm." Thus, to constitute misinformation, a training must present false or misleading information. D2.3 does nothing of the sort. It faithfully records what took place over three days of training in Warsaw, during which experts focused on physiology, trauma, mental health, refugee experiences, menstrual cycle disorders, hormonal health, and access to care. All information presented was medically accurate, clinically grounded, and directly relevant to the needs of youth workers.

The reviewers' claim is instead based on the assumption that any training on women's reproductive health must include abortion and contraception in order to be legitimate. Neither EU law nor the Grant Agreement supports this assumption. Moreover, the training took place in Poland, where abortion on demand is not legal.

Similarly, the expectation that the training should have addressed rape misinterprets the event's objectives. This was not a general course on gender-based violence or criminal law; it was a focused training for youth workers on supporting women's mental and reproductive health in community settings. The training did, in fact, address certain types of trauma related to displacement and war, experienced by Ukrainian refugee women. However, a training event does not "misinform by omission" by not including topics that

fall outside its core purpose, its legal environment, or the requirements of the Grant Agreement. What the reviewers interpret as omission is, in truth, their own disagreement with the training's legitimate thematic focus, not any indication of bias, inaccuracy, or non-compliance.

### **Youth Participation and Selection**

The Review Report raises a concern about the lack of information on how young people were selected and how they contributed to the design of project deliverables. The grant was managed, designed, and implemented by youth and youth-led leadership at WYAE. Young people coordinated the work and participation of partners, invited participation of young people, particularly those representative of grant objectives, and partner input, and managed the collection of information, input, partnership collaboration, and deliverables.

For WP1 and WP2 the obligations were met and reported; a process managed, coordinated, and curated by young people. The grant requested a co-creation initiative by young people, led and initiated by them. This is exactly what they did. The Technical Report makes it clear that young women, especially those with fewer opportunities, including refugees, were actively involved at the level appropriate to the project's design, including in the Brussels Training for youth workers where the participants expressed their opinions on project issues, as well as in the Warsaw 3-days Mobility of Youth Workers: EmpowerHER - Exploring Women's Mental & Reproductive Health, where they not only had interactive discussion and Q&A session with the expert speakers, but also brainstorming and participated in planning sessions led by youth workers. Partners and youth workers took those inputs into account and used them as guideposts during deliverable creation. Young female refugees participated in outreach activities, attended pilot events, and were trained directly by other youth workers.

Partners recruited these young participants through their existing youth networks, university groups, community hubs, and migrant support organizations. This approach is fully consistent with Annex 1, which emphasizes engaging young women facing disadvantage, but does not prescribe any formal selection mechanism or representative sampling.

For WP1 and WP2, the obligations were clearly met: partners were asked to gather existing methodologies, create a training program, and train youth workers. That is exactly what they did.

It is absurd to suggest that young people had no influence on the project's development. We must emphasize again that the entirety of WYA Europe staff and volunteers are youth

aged 30 or younger, as is defined in the WYA Charter. The role of youth participants is central at every phase, including at the implementation phase, particularly in WP3, where youth workers apply the methods developed in WP2 in real settings. Feedback from young women during these pilot sessions is then used to refine approaches, improve content, and adjust facilitation techniques.

**Allegation that WYA “dismisses widely accepted scientific evidence and public health guidance”**

The EACEA alleges that WYA "dismisses widely accepted scientific evidence and public health guidance". The Review then focuses on positions and white papers published by WYA previous to the grant application, which offer science and evidence-based positions on HIV/AIDS approaches, and sexual education.

WYA's white papers stand on their own. They are outside the scope of this Review and have no bearing on the content created for this grant. They were published before the grant process began, and, in the case of the white paper on sexual education, was published in a peer-reviewed publication in 2014.

The EACEA inclusion of a section of its Review Report, critiquing scientific and evidence-based publications developed long before this grant is a further example of a bias towards predetermined conclusions that led to the drafting of this review, and ideological bias represented in such remarks.

The Review suggests that World Youth Alliance “downplays” condom effectiveness and rejects mainstream HIV prevention strategies. A closer reading of WYA's HIV/AIDS White Paper shows something very different. The document relies extensively on data from WHO, UNAIDS, and the World Bank. It uses standard epidemiological distinctions, such as concentrated versus generalized epidemics, and acknowledges the same scientific evidence about routes of transmission that international agencies rely on.

Far from denying the effectiveness of condoms, the White Paper recognizes them as an important risk-reduction tool. It simply notes, in line with public health teaching, that condoms reduce but do not eliminate the risk of HIV transmission, and that the balance of prevention strategies may differ depending on the type of epidemic. It also highlights the central role of antiretroviral therapies and emphasizes that prevention should integrate treatment, care, and support.

The Review claims that WYA “dismisses” accepted norms by stating that there is no human right to comprehensive sexuality education. In reality, WYA's Sexual Education White Paper is a legal analysis, not a rejection of science. It examines the claim often made by NGOs, UN rapporteurs, or advocacy groups, that CSE is a binding international human

right, and concludes that this is not supported by the actual sources of international law. This is a standard legal position: binding rights come from treaties and customary law, not from policy documents or political declarations.

The same holds true within the EU. While EU institutions may promote CSE in certain political resolutions or strategies, these are not binding legal obligations on Member States. Education remains a national competence. EU policy preferences do not create enforceable rights. Again, we must emphasize - this document was created 10 years before the implementation of the WGHD project grant, is outside of the scope of the project and its inclusion here only serves to contradict another review allegation - that WYA was in any case unclear about its positions or activities in the time or during the application process.

**Allegation that WYA “rejects the claim that gender can contradict biological sex”**

WYA affirms that human beings are embodied persons, and that our biological sex is a fundamental aspect of who we are, not a trait that can be conceptually severed from personal identity. This is a scientific, philosophical and anthropological understanding of the human person supported by foundational and clinical science, articulated in the WYA Charter and consistently reflected in our educational materials.

EU primary law itself uses sex-based terminology, and the core value of gender equality in Article 2 TEU is expressed explicitly as “equality between women and men.” The Treaty does not define gender as an autonomous identity category, nor does it present gender identity as conceptually separable from sex. Member States retain wide discretion in how they understand and regulate gender-related matters, reflecting their constitutional traditions, ethical frameworks, and cultural diversity. WYA’s position aligns with this legal landscape: it does not contradict EU values, nor does it undermine equality before the law.

WYA stands by its understanding of the human person. It is a position grounded in science and longstanding philosophical anthropology, compatible with the EU Treaties, and respectful of every individual’s dignity. Disagreement with contemporary gender theory cannot be interpreted as a rejection of science or a form of discrimination.

**Allegation that WYA “did not provide sufficient clarity about its positions and methodologies during the application process”**

The Review Report asserts that WYA “did not disclose” its methodology, values, or educational approach during the application process. This allegation is unfounded. The Grant Agreement did not require beneficiaries to submit an exhaustive description of their organizational philosophy or to enumerate every methodological element of the

programs they intended to share. What was required, and what WYA Europe provided, was a clear articulation of the project's objectives, methodologies, impact, target groups, work packages, and the specific deliverables committed under each WP. All of this was transparently set out in the application documents and is reflected in Annex I.

World Youth Alliance is not an opaque or unknown organization. Our philosophical commitments, including the centrality of human dignity, the integration of body and person, the importance of informed decision-making, have been publicly articulated for more than 25 years. At the time of application, and indeed for decades before, these positions were prominently displayed: on the WYA website (charter, mission, and program descriptions); in publicly available white papers, policy briefs, and educational guidelines; across official social media accounts; in training programs run in multiple European countries, in public events, conferences, and youth training programs; and within WYA Europe's own Brussels-based advocacy work. They were all publicly available at the time of the application as they are at the time of the review. WYA Europe has been a recipient of operating grants for more than a decade.

The WHGD project was presented as a capacity-building project for women's mental and reproductive health, with a focus on young women with fewer opportunities. The deliverables reflect exactly that: medically grounded content, trauma-informed sessions, reproductive health literacy, mental health support, cycle tracking for hormonal awareness, and tools for youth workers supporting refugees and disadvantaged youth.

### **Procedural irregularities performed by EACEA in this review process**

In addition to responding to the allegations in the Review Report, we want to briefly reflect on our experience during the ongoing review process. For more than a decade, we have worked with the EACEA in a professional, transparent and open way. Our grant reviews, questions, and communication have reflected the fair, impartial and legally based processes the EACEA prides itself upon. We were treated equally with all other grant recipients during this time.

This has not been our experience with this review. We have not been treated openly and transparently as we have in the past; leading us to question if we have been treated equally with all other grant recipients. Irregularities in our communication and treatment during this process include the following:

1. No meeting between the beneficiary and the body performing the review was requested or held prior to receipt of the letter and Review Report. While there is no obligation to conduct such a meeting, it is the common approach by the EACEA and their

grant review process, and, when conducted, is constructive, evidence-based and supports mutual dialogue.

2. During the review process, WYAE was asked to send numerous participant lists, materials and supporting documentation. Most of this was not taken into account during the review process nor mentioned in the Review Letters. In fact, a significant portion of the Review Letter discusses other materials produced by WYA (such as the WYA Charter or white papers), although they were not produced or used in the project itself.

3. During the review process, EACEA used some of the participant contacts to contact participants asking them about their opinions about WYA. The “questionnaire” that was a part of “this monitoring exercise” also included instructive questions, such as: “Do you consider that it would be possible for someone to participate in WYA activities if they did not share their values?”, “Were perspectives/views/values other than those associated with WYA presented in the workshop/event/training?” or “Were there any topics not covered during the workshop/event/training which you think should have been addressed?”.

In the light of the Review Reports, it is clear that those questions were asked to support the pre-determined conclusions made by the EACEA.

Despite the obvious bias of the survey questions, many of the participants responded to the EACEA questionnaire negating the implications. They commented that they had a positive experience, that events provided equal time to diverse and various viewpoints, that debate and discussion took place in an open and constructive environment, and that individuals who do not share WYA values participated in the project activities. None of these responses were included in the project review, thus invalidating the credibility of the "monitoring exercise".

4. During the review process, the EACEA staff failed to respond to WYAE regarding several questions from May to November 2025. This is thoroughly described in a Formal Notification 2 sent on November 5, 2025. For more than 6 months, WYAE received no clear response regarding the project implementation and follow-up questions, arising from the grant review process initiated by EACEA. This lack of information clearly jeopardized the regular implementation of the project, and signalled the lack of transparency, open communication and support that WYAE received throughout this grant process.

## Conclusion

The WHGD project was implemented faithfully, professionally, and in full conformity with the Grant Agreement. The Review's criticisms do not demonstrate any breach of Article 14 or any failure to respect EU values. Instead, they reflect an expectation that beneficiaries should align their educational content with specific political preferences or non-binding policy documents. This approach is incompatible with EU law.

EU values under Article 2 TEU and Article 14 of the Grant Agreement are legal principles, not ideological positions on contested questions of sexuality education, gender theory, or reproductive ethics. Nothing in EU primary law mandates adherence to a single framework of reproductive health or prescribes the inclusion of particular topics in health-education curricula. The Charter guarantees freedom of thought, conscience, expression, and association; these protections ensure that philosophical and anthropological viewpoints such as those reflected in the WYA Charter can coexist legitimately within EU-funded projects.

All reviewed deliverables fulfil precisely the obligations set out in WPs 1 and 2. They present accurate scientific information, legally grounded analyses, multilingual and inclusive dissemination, and educational programs adapted to the realities of youth workers and disadvantaged young women. The Review's objections, whether regarding contraception, abortion, gender terminology, or the scope of topics covered, are ideological, not accurate and based on criteria outside of the scope of the Grant Agreement. WYAE reaffirms that the project's outputs were inclusive, non-discriminatory, scientifically accurate, and fully aligned with EU values.

Sincerely,

World Youth Alliance Europe team