## <u>Module 1: Introduction to adolescence and to adolescent health - Adolescent health and</u> development with a particular focus on sexual and reproductive health - Assignment

<u>Jean-José Wolomby-Molondo</u>

<u>Department of Obstetrics and Gynaecology, University Clinics of Kinshasa,</u>

Kinshasa, Democratic Republic of Congo

World Bank. World Development Report 2007. Development and the next generation. Washington: World Bank; 2007.

This document highlights the relevance for investing in young now and why to invest during youth's five life transitions.

In many developing countries, demographic data show what is called "youth bulge". This situation provides the opportunity to accelerate growth and to reduce poverty (O.M.D. 1). The document describes the youth's five life transitions: learning after primary school age, starting a productive work, adopting a healthful lifestyle, forming a family and exercising citizenship.

New policies must be developed in order to accompany young people through this period of life.

These policies should focus on 3 strategic directions of reform:

- To broaden the opportunities for developing human capital: learning after primary school age will provide young people with knowledge, skills and healthful behaviors. A such young people will enter workforce health and with fewer burden (less children and less elderly to support).
- To develop young people's capabilities to do an informed choice among these opportunities: what kind of studies, what level, what job, when to get married, the family size, how to take care of maternal health...
- To provide an effective system of second chances: flexibility of mainstream programs, coordination of programs aimed to mitigate the effects of undesirable human development outcomes for youth.

Young people should be involved in the development of these policies. The investments should come from governments, young people, their parents and their communities.

<u>UNFPA</u>. <u>UNFPA</u> framework for action on adolescents and youth. Opening doors with 4 keys. <u>New York: UNFPA</u>; 2007.

The executive summary reminds the public health issues related to adolescents and young people which militate for investing in this group. The gap between the MDG (1,2,3,5 and 6) targets and the current state requires an immediate action. The framework for Action, as a response to several needs of young, has been developed by UNFPA for 3 reasons:

UNFPA work must contribute to the comprehensive development of young people, it needs a guide in order to play a role, as UN agency with other UN agencies, on poverty reducing by bringing support in the area of young people and because of changing development aid, the framework articulates UNFPA's corporate position.

Such a framework allows different stakeholders to speak a common language while maintaining a room of flexibility.

The framework is based on the Fund's Commitment to invest in young people and aims at the translation of commitment to action.

The Fund supports governments and partners to achieve the rights of adolescents and youth: education, health, livelihood, participation to the development.

To fulfill this vision, UNFPA positions itself in four key areas:

- Supportive policy making that applies population structure analyses and implications of poverty dynamics: the Fund will focus public policy on young people and incorporate their issues in national development and poverty reduction strategies.
- Gender-sensitive, life-skills-based Sexual and Reproductive health education in schools and community settings within the context of Sector Wide Approaches and Poverty Reduction Strategies and education reforms.
- Sexual and Reproductive Health services by promoting a core package of health and SRH services and commodities by using multiple channels within the national program context and by working with other sectors.
- Young people's leadership and participation: The Fund will identify institutional
  mechanisms for involving young people's input into policy and programming processes.
  It will invest to make young people advocates for their own rights and development
  issues and will promote peer educators.

The keychain "intergenerational alliances" will link the 4 keys together. A specific attention is spayed for economically disadvantaged, socially marginalized and vulnerable groups.

WHO. Strengthening the health sector response to adolescent health & development. Geneva: WHO; 2009.

The document defines the concept "adolescent" and describes the changes that occur during this period of life. The adolescent has the opportunity to set a stage for healthy and productive adulthood. He can also suffer from health problems with immediate consequences or adopt behaviors with adverse effects in the future.

The document presents 3 reasons for investing in the health and the development of adolescents:

- Public health reason: it will reduce deaths rate, improve health of adolescents and promote healthy behaviors which will prevent health problems in the future.
- Economic benefits reason: healthy adolescents can increase the economic productivity.
- Human rights reason: the investment meets the UN convention of the rights of the Child.

Stakeholders are from health sector and from other sectors.

The WHO Department of Child and Adolescent Health and Development contributes to the improvement of adolescent health. It has a 4-S framework which uses 2 programmatic entry points: HIV and pregnancy. The choice of these entry points is due to the fact that many adolescents live with HIV and experience SRH problems, many countries have national programs in place to address these priorities and these priorities are the focus of international development goals.

The 4-S framework can be uses to address other health issues affecting adolescents.

SRH and HIV programs highlight the fact that adolescents require specific attention. However, their needs are not addressed in a concerted manner.

National ministries of health (MOH) should play a role of coordinating diverse efforts as parts of one national effort. National SRH and HIV programs should incorporate key elements of the WHO 4-S framework for strengthening the health sector response to adolescents' needs.

- 1. Gathering and using strategic information: MOH should facilitate systematic collection, analysis, dissemination and use of data for advocating and informing relevant policy and programs development.
- 2. Developing supportive evidence –informed policies. National SRH and HIV strategies should include enabling and guiding policy statements on what programmatic actions need to be carried out and how to implement these statements in order to effectively address the specific needs of adolescents.
- 3. Scaling up the provision of health services and commodities: MOHs should play a leadership role in guiding the provision of health services to adolescents. They should put in place initiatives aimed at expanding the coverage and improving the quality of health care for adolescents.
- 4. Strengthening other sectors: MOHs should engage with other sectors and civil society to actively contribute to addressing adolescents' health issues and supporting them to do so using evidence-based approaches.

Other sectors and civil society should work in collaboration with the health sector.