

Introduction to adolescence & to adolescent health

Department of Maternal Newborn Child
and Adolescent Health
World Health Organization



**World Health
Organization**

Training Course in Sexual and Reproductive Health Research
Geneva 2011

Topics

1. The meaning of adolescence
2. The health problems that adolescents face
3. What adolescents need to grow & develop in good health
4. Who needs to meet the needs & fulfil the rights of adolescents
5. Why we should invest in the health & development of adolescents
6. Frameworks for addressing the health & development of adolescents



**World Health
Organization**

1. What do we mean by the term
'adolescents' ?

The second decade: No longer children, not *yet* adults !



Adolescents	10 - 19 years
Youth	15-24 years
Young people	10-24 years

Source: A picture of health? A review and annotated bibliography of the health of young people in developing countries (WHO, UNICEF, 1995).

Adolescents are a diverse population group

Different needs

Changing needs



What is special about adolescence ?

(What makes it different from childhood & adulthood ?)

- A time of rapid physical and psychological (cognitive and emotional) growth and development.
- A time in which new capacities are developed.
- A time of changing social relationships, expectations, roles and responsibilities.

2. What do we mean by the term
'health' ?

“Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

Source: Constitution of the World Health Organization, 1948.

3. What are the main health problems of adolescents ?



Many adolescents move from childhood through adolescence into adulthood in good health.

Key health problems in adolescence.

Sexual & reproductive health

- Too early pregnancy
 - risks to mother
 - risks to baby
- Health problems during pregnancy & child birth (including unsafe abortion)
- Sexually Transmitted Infections including HIV
- Harmful traditional practices e.g. female genital mutilation
- Sexual coercion

Other issues

- Injuries from accidents & intentional violence
- Mental health problems
- Substance use problems
- Endemic diseases: malaria, schistosomiasis, tuberculosis
- Under/over-nutrition

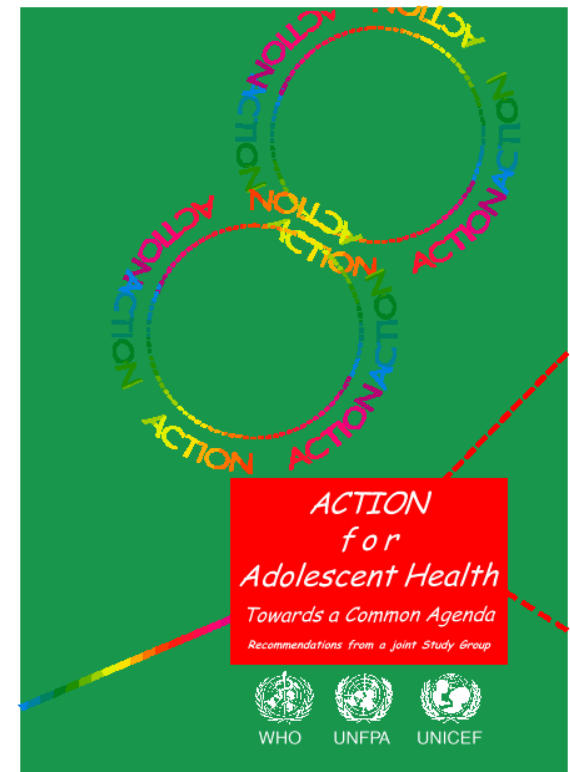
Source: United Nations. World Youth Report 2005. Young people today, and in 2015.
United Nations. 2005. ISBN 92-1-130244-7.

4. What do adolescents need to grow & develop in good health ?

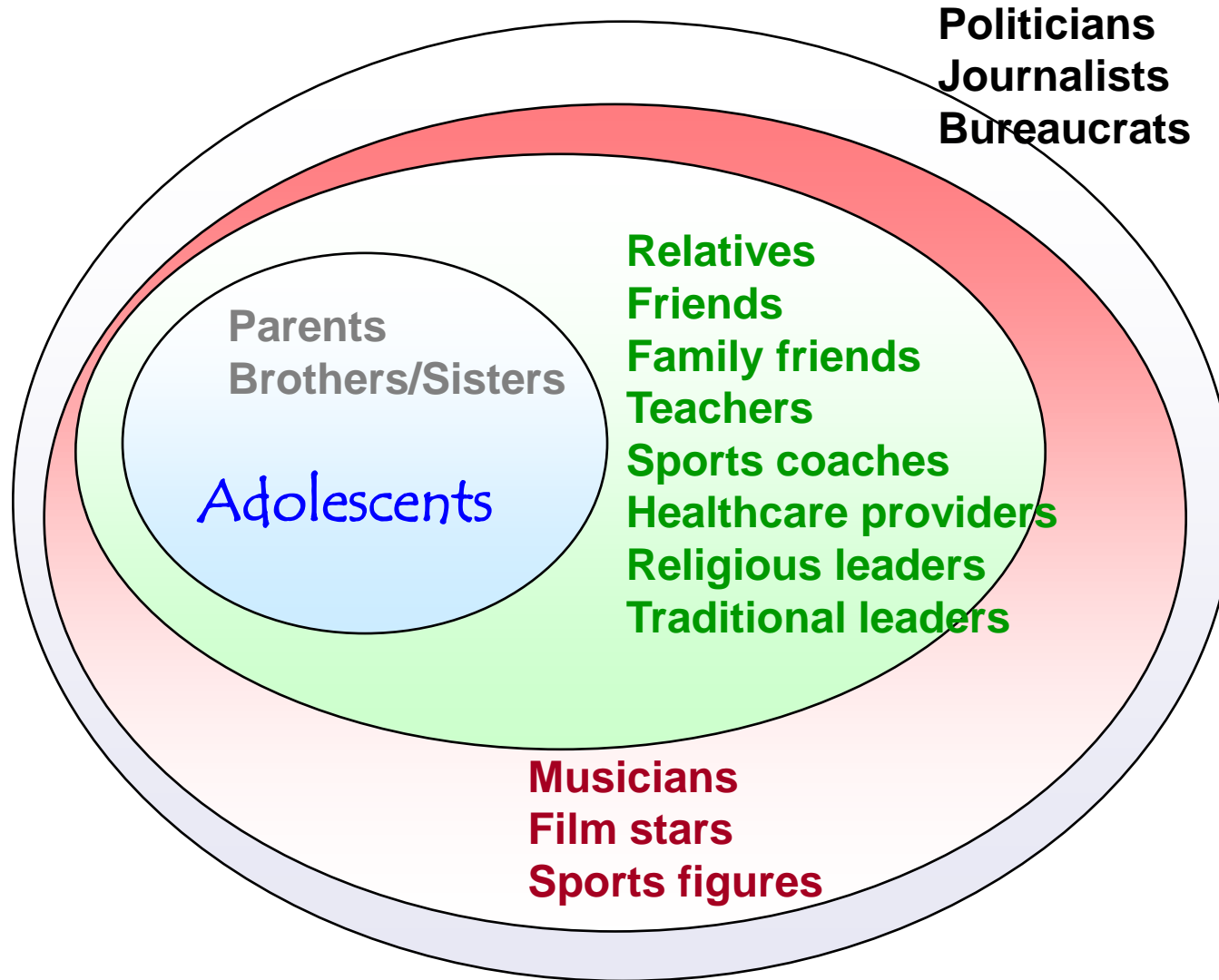


What adolescents need & why?

- **Information & skills**
(they are still developing)
- **Safe & supportive environment**
(they live in an adult world)
- **Health & counselling services**
(they need a safety net)



5. Who needs to contribute to meeting these needs & fulfilling these rights ?



6. Why should we invest in the health and development of adolescents ?



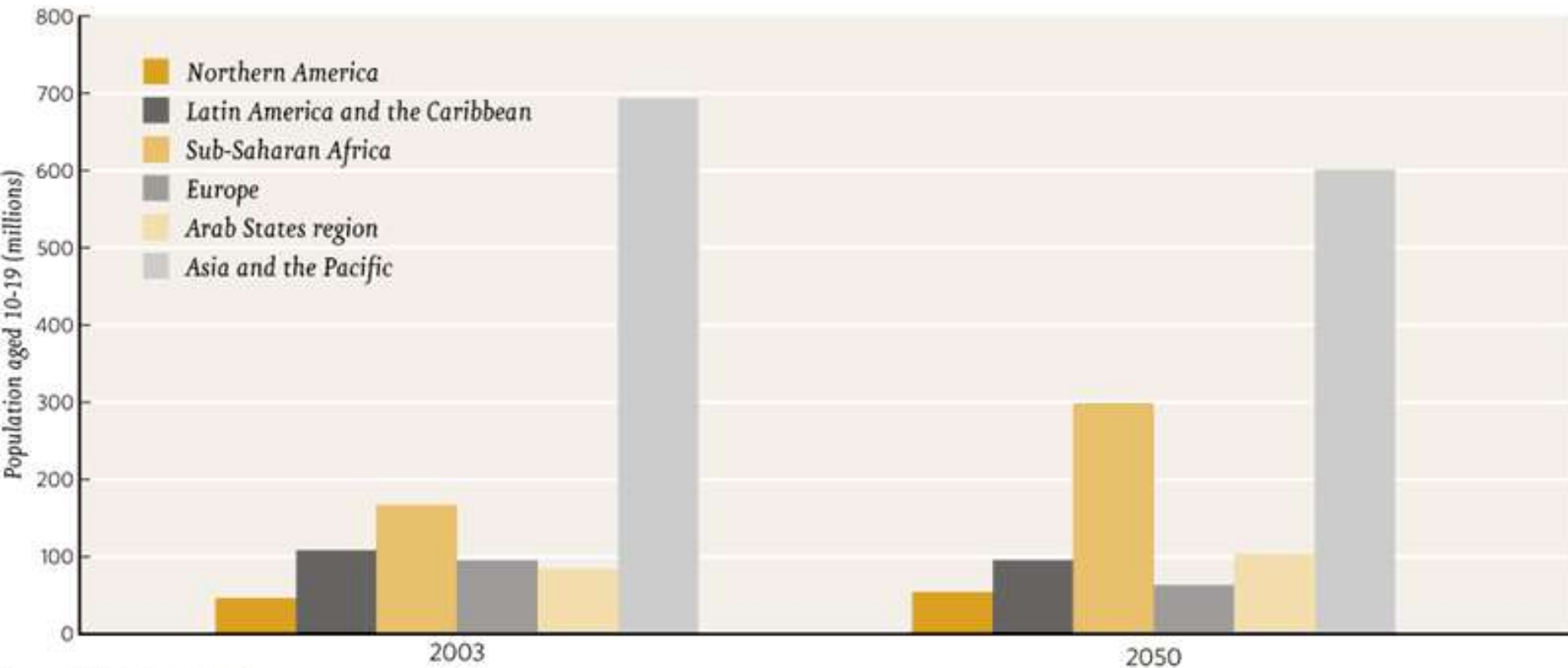
- Demographic rationale
- Public health rationale
- Economic rationale
- Human rights rationale

Demographic rationale – 1/2



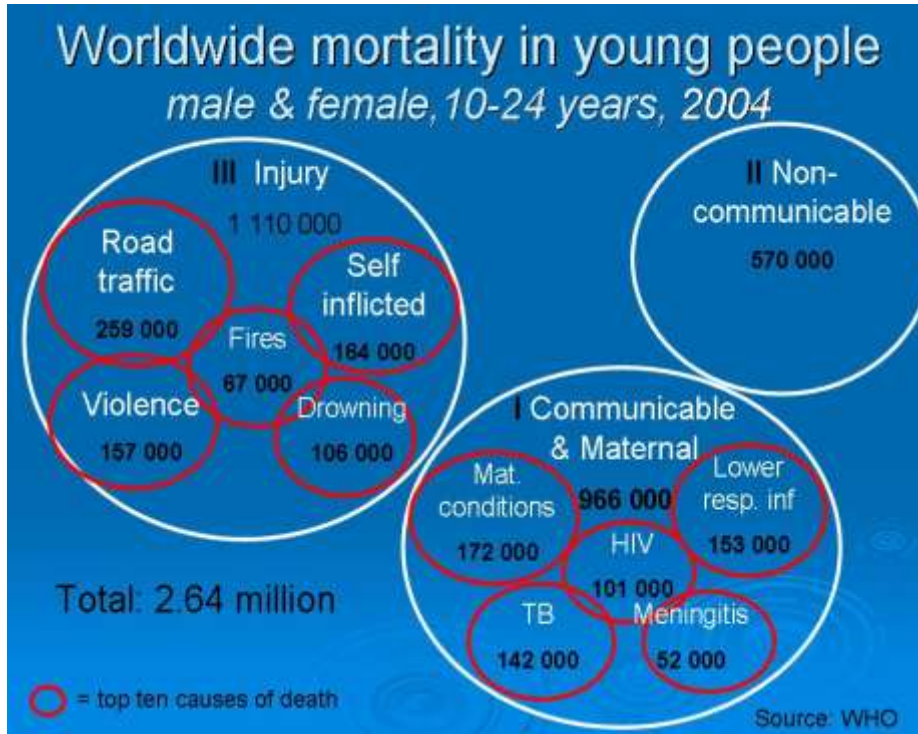
- **One in five individuals in the world today is an adolescent (around 1.2 billion).**
- **The largest number of adolescents in the history of mankind.**

Demographic rationale – 2/2



Source: UN Population Division

Public health rationale: mortality – 1/5



- There are around 2.6 million deaths among the 10-24 year age group worldwide every year.
- 97% occur in low and middle income countries.

Public health rationale: mortality 2/5

Death by condition by 5 year age group, 1999

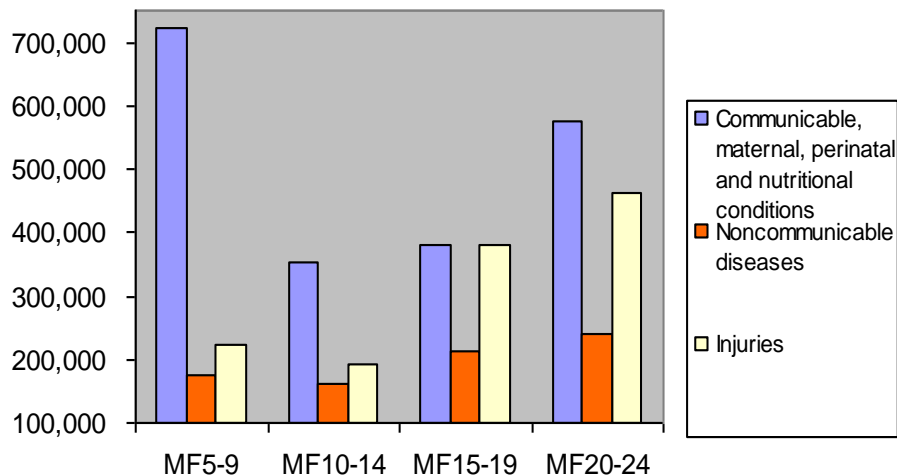
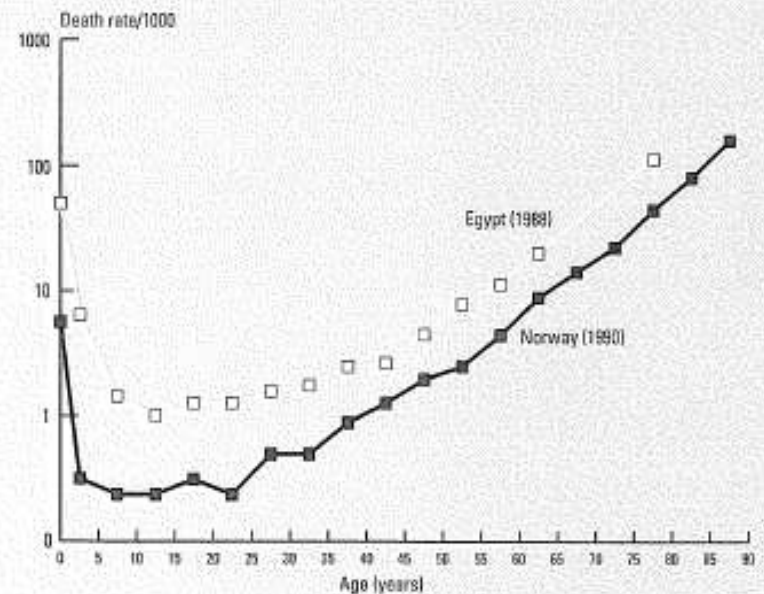


Figure 3. Death rates by age for females in Norway and Egypt

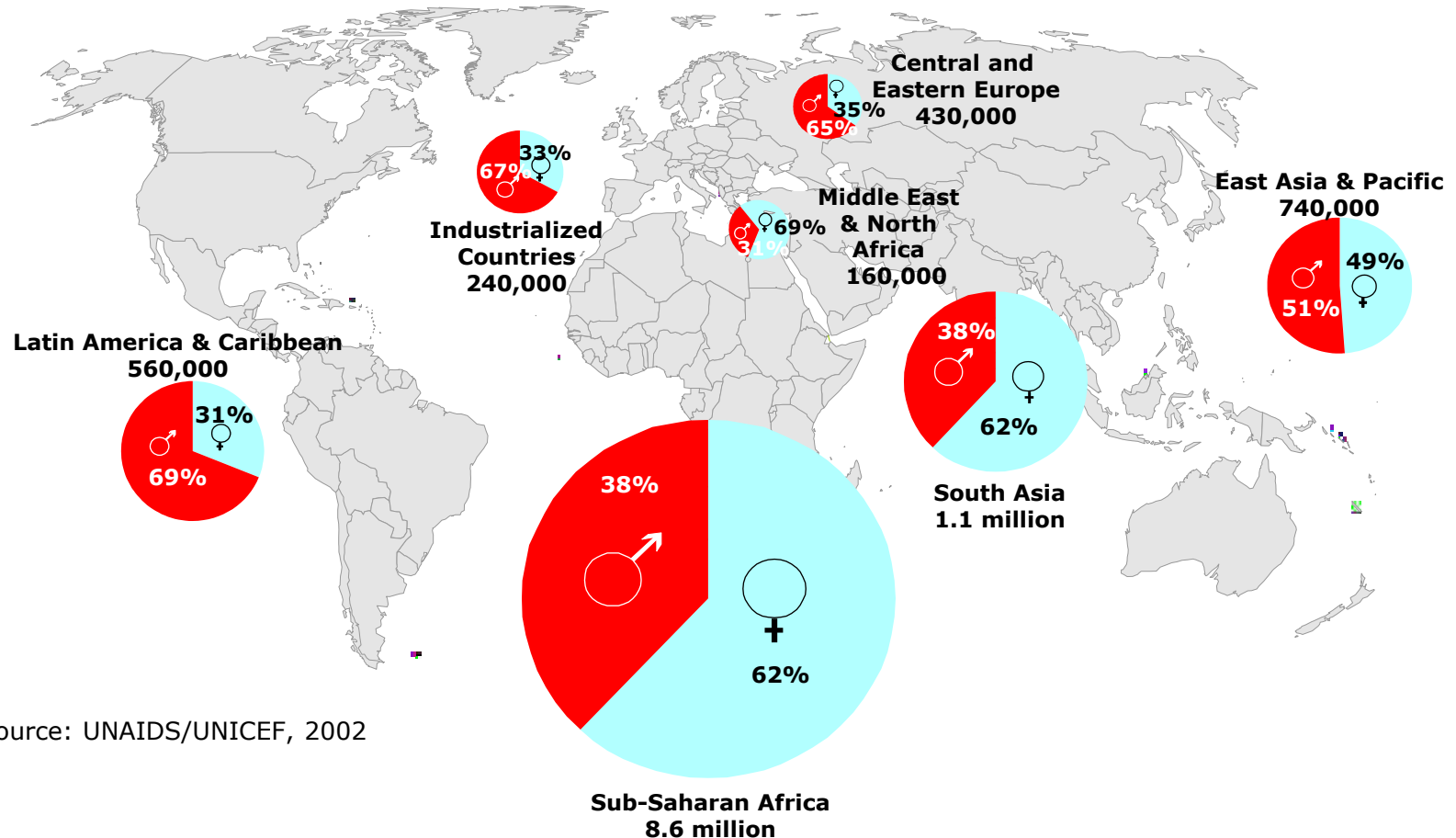


Source: United Nations (1991)

A Picture of Health, WHO/UNICEF (1995)

Public health rationale: morbidity – 3/5

There are over 10 million young people (15-24) living with HIV/AIDS

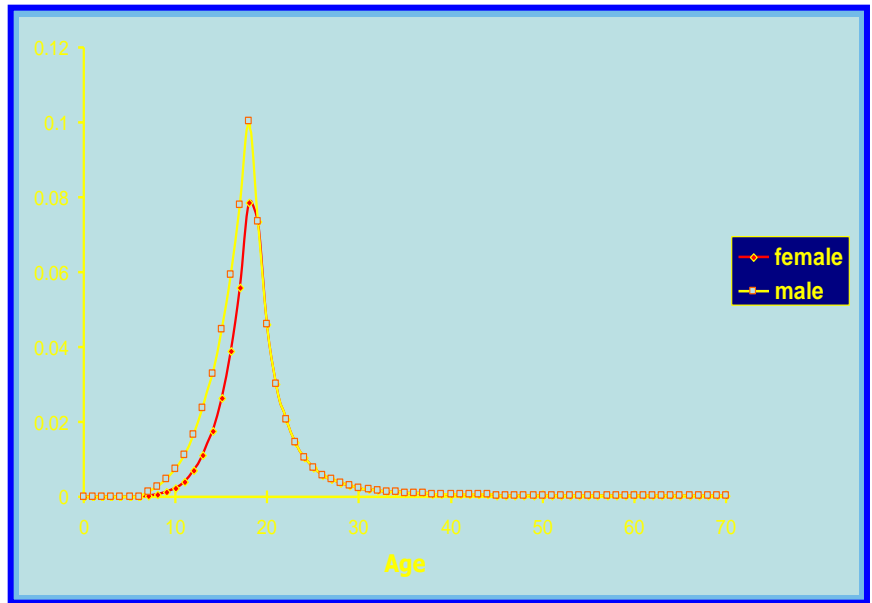


Source: UNAIDS/UNICEF, 2002

Public health rationale: behaviours – 4/5

- Nearly two thirds of premature deaths and one third of the total disease burden in adults are associated with conditions or behaviours that began in youth.

**World Development
Report 2007**



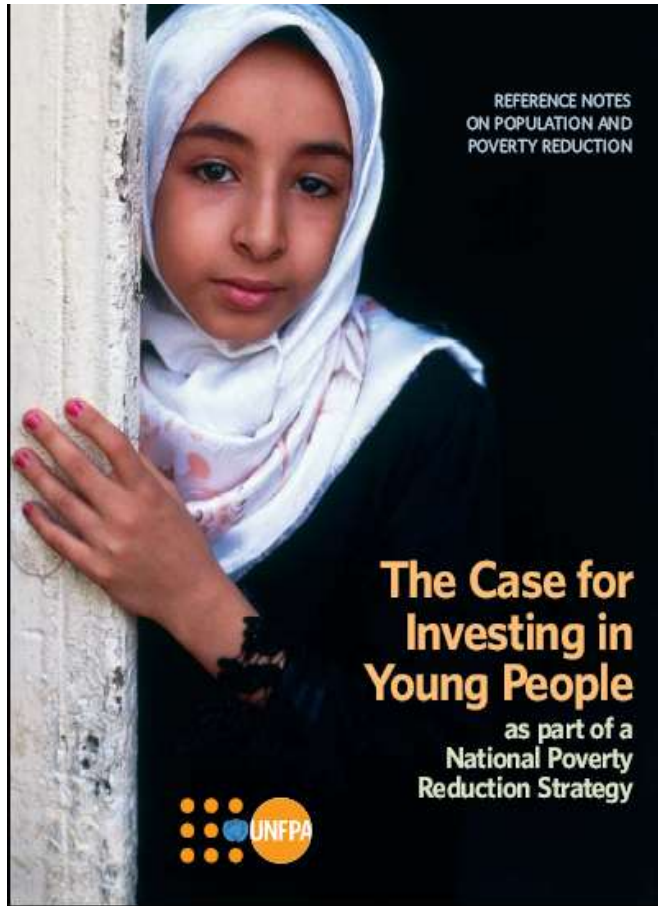
Age of smoking initiation

Public health rationale – 5/5

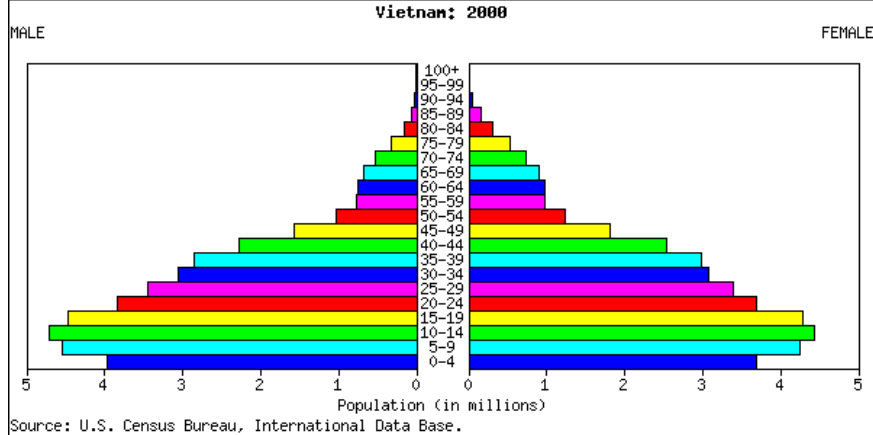
sound reasons for investment for this generation

Health problems / health-related behaviours during adolescence	Age when this has its major impact		
	Adolescence	Adulthood	Childhood (next generation)
Injuries and violence	+++	+	
Too-early pregnancy	++	+	++
Human Papilloma Virus infection	+	+++	
Tobacco use	+	+++	+
HIV infection	+	+++	++

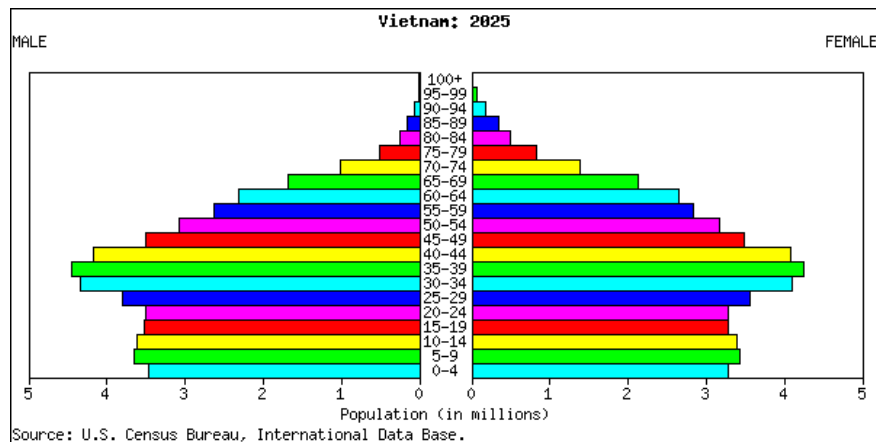
Economic rationale – 1/4



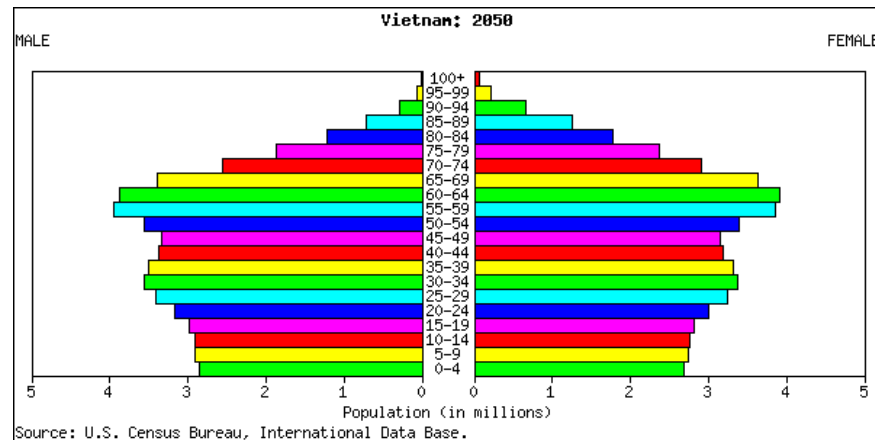
1. The benefits of investing in adolescents
2. The cost of not investing in adolescents



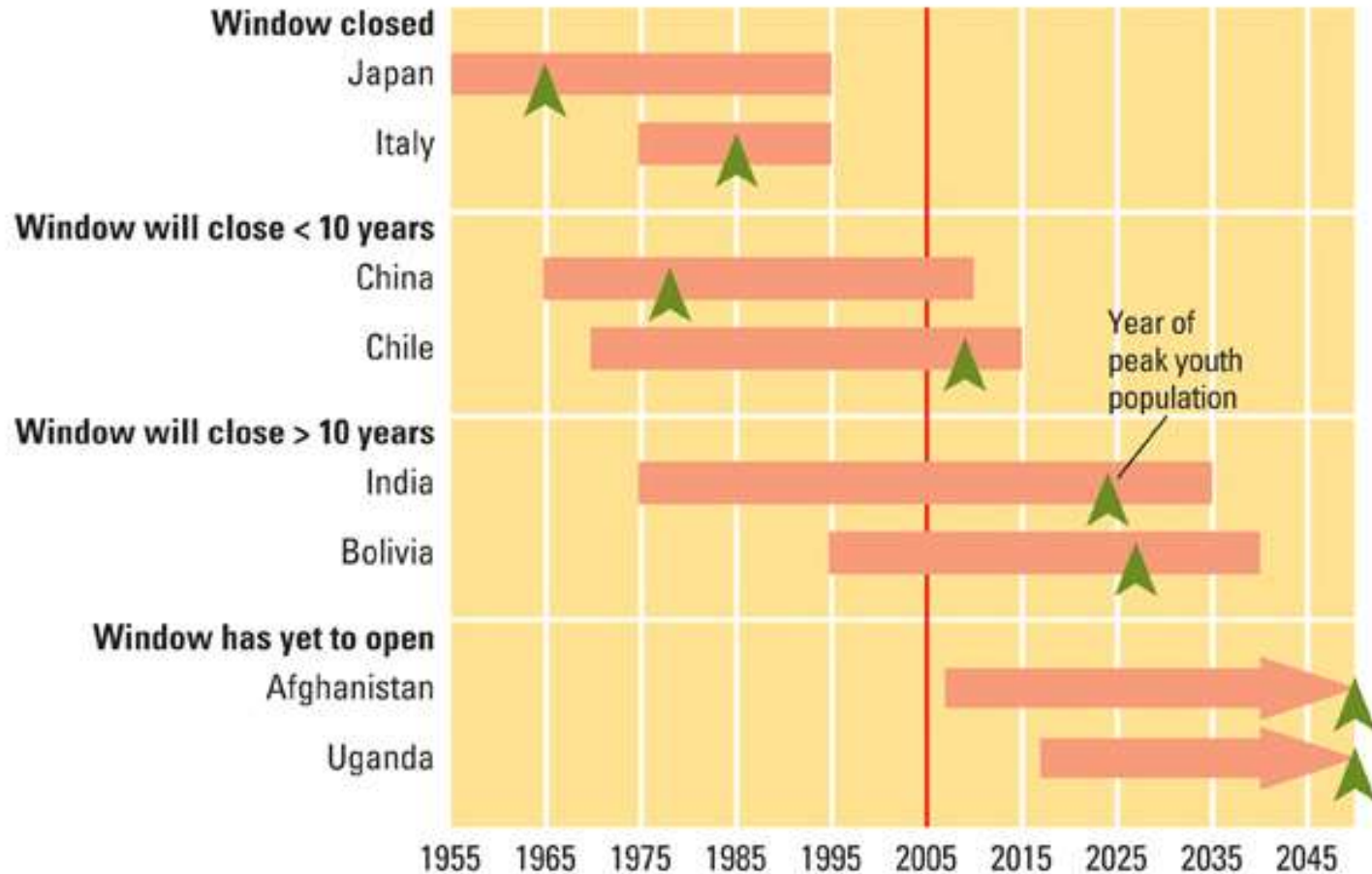
Economic rationale – 2/4



The need to make full use of the *demographic dividend* when one can.



Economic rationale – 3/4



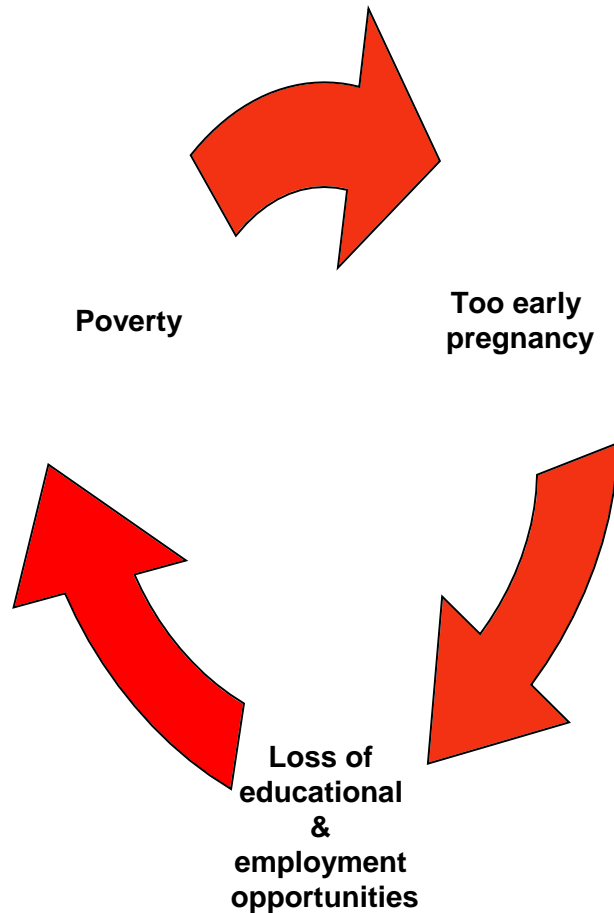
The need to act before the **demographic transition** closes doors.

Source: United Nations (2005b), medium variant.

Note: Bars show the range of years for which the dependency ratio—the number of dependents relative to people of working age—is falling.

Economic rationale - 4/4

Socio-economic deprivation: a cause & consequence of adolescent pregnancy



" We young women are not prepared to become mothers. I would like to continue my studies. But since I have had my daughter, my options have changed because I have many more obligations now."
Eylin 19, Honduras January 2006.

Source: World Development Report 2006 (World Bank, 2006.)

Human rights rationale -1/2



Choices: A guide for young people
Gill Gordon, 1999.

Convention on the rights of the child

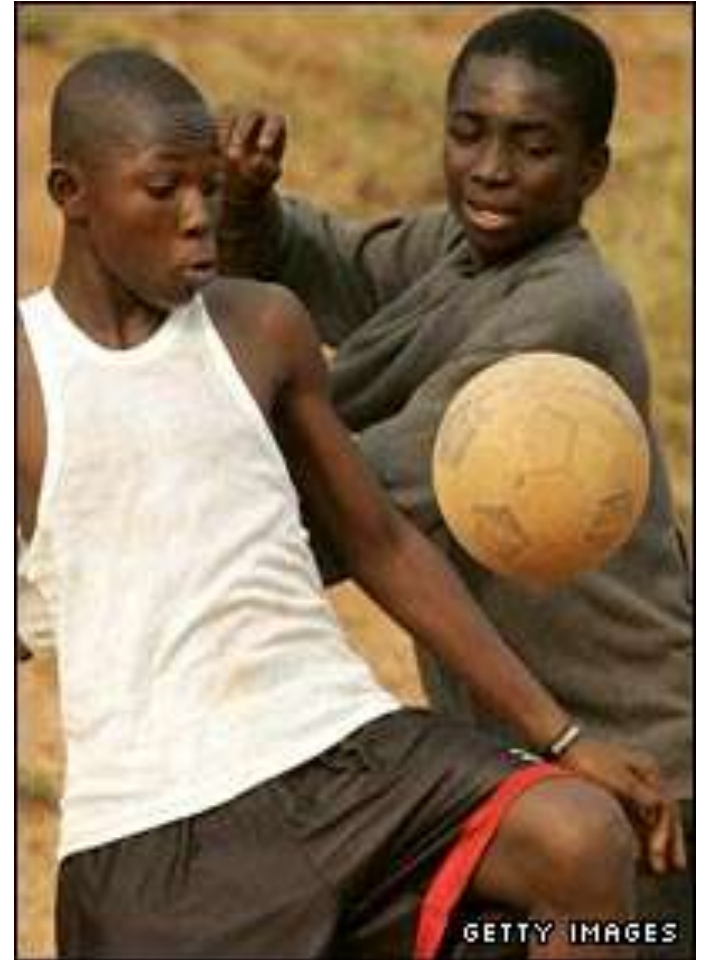
- Article 24: The right to the highest level of health possible & to access the required health services
- Article 17: The right to access appropriate information from the media & to be protected from harmful information
- Article 13: The right to seek, receive and impart information and ideas of all kinds

Human rights rationale – 2/2

For many adolescents the world is in fact '*flat*':

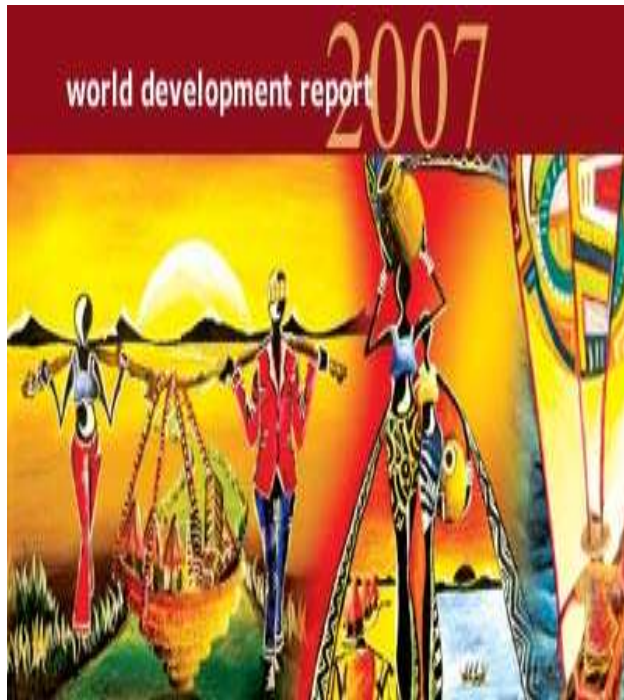
- **Greater access to education**
- **Greater access to information about the world**
- **Greater ability to make personal & professional choices**

For many other adolescents, the reality is very different



6. Frameworks for addressing the health and development of adolescents

World Bank framework: Youth transitions seen through three lenses

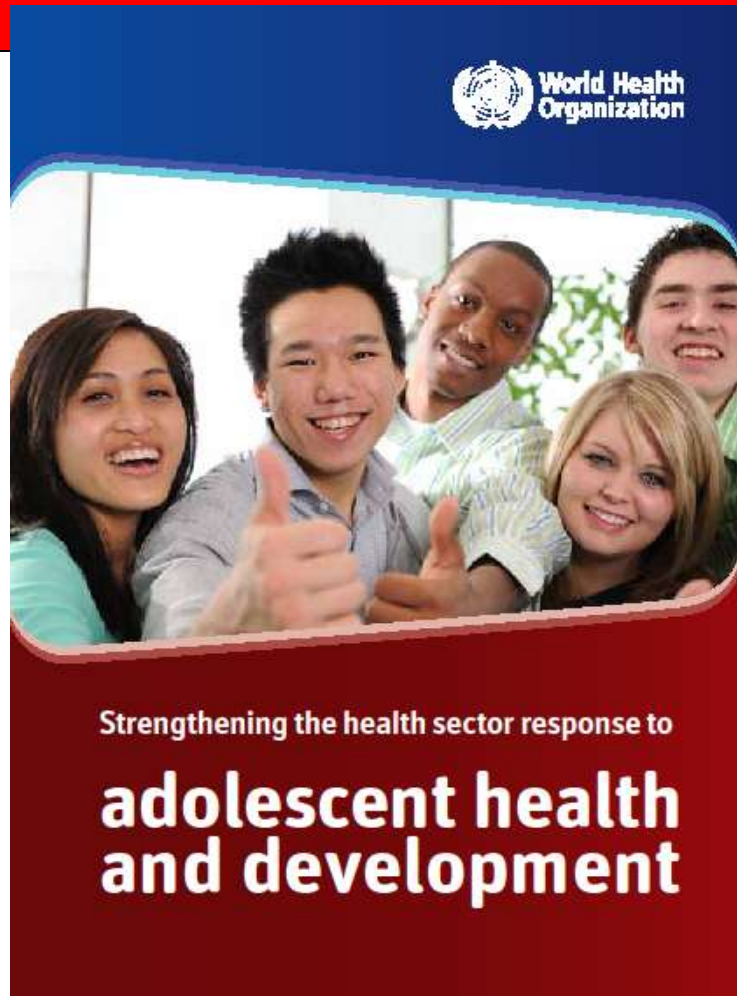


First lens: Broadening **opportunities** for young people to develop skills and use them productively.

Second lens: Helping them acquire the **capabilities** to make good decisions in pursuing those opportunities

Third lens: Offering them **second chances** to recover from bad decisions, either by them or by others.

WHO: Delineating & strengthening the contribution of the health sector



S

Strategic
information

S

Supportive
evidence-informed
policies

S

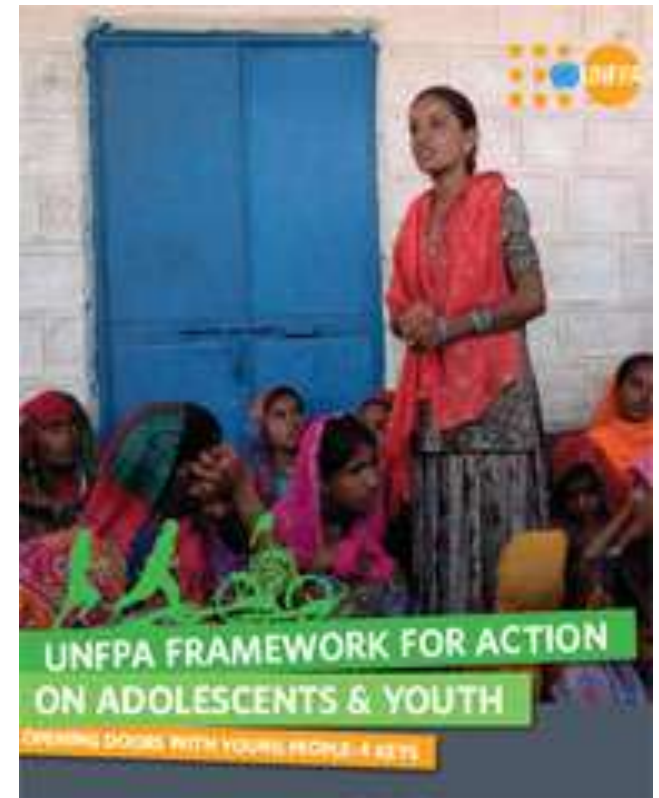
Services &
commodities

S

Strengthening &
supporting
other sectors

UNFPA framework for action on adolescents & youth

1. Supportive policy making that applies the lens of population structure & poverty dynamics analyses
2. Gender & life-skills based sexual & reproductive health education
3. Sexual & reproductive health services
4. Young people's leadership and participation



Source: UNFPA framework for action on adolescents and youth. Opening doors with 4 keys. UNFPA. New York, USA. Undated.