Introduction to adolescence & to adolescent health

Training Course in Sexual and Reproductive Health Research
Geneva 2012

World Health Organization
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
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

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.”

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.

<table>
<thead>
<tr>
<th>Sexual &amp; reproductive health</th>
<th>Other issues</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Too early pregnancy</td>
<td>- Injuries from accidents &amp; intentional violence</td>
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<tr>
<td>• risks to mother</td>
<td>- Mental health problems</td>
</tr>
<tr>
<td>• risks to baby</td>
<td>- Substance use problems</td>
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<tr>
<td>- Health problems during pregnancy &amp; child birth</td>
<td>- Endemic diseases: malaria, schistosomiasis, tuberculosis</td>
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<tr>
<td>(including unsafe abortion)</td>
<td>- Under/over-nutrition</td>
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<tr>
<td>- Sexually Transmitted Infections including HIV</td>
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<tr>
<td>- Harmful traditional practices e.g. female genital mutilation</td>
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<td>- Sexual coercion</td>
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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?
Politicians
Journalists
Bureaucrats

Relatives
Friends
Family friends
Teachers
Sports coaches
Healthcare providers
Religious leaders
Traditional leaders

Parents
Brothers/Sisters

Adolescents

Musicians
Film stars
Sports figures
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 is an adolescent, aged 10-19 years.
- Most adolescents live in developing countries.
- In these countries, they represent up to a fourth of the population.

Every year about 1.4 million deaths occur in adolescents.
Most of these deaths occur in low & middle income countries
Death rates vary by region & sex
Death rates rise sharply from early adolescence (10-14) to young adulthood (20-24)
Leading causes of death vary by sex and by region.

Morbidity

Tens of millions of adolescent girls face health problems

- In 11 countries (out of 64 with available data), a quarter of the adolescent girls are underweight.
- In 21 countries (out of 41 countries with available data), a third of adolescent girls are anaemic.
- Globally, about 2.2 million adolescents are living with HIV.
- Between 40-70% ever-married girls aged 15-19 reported that they experienced emotional, physical or sexual violence by their current or most recent husband or partner.

Public Health Rationale 3/4
Behaviours

Hundreds of millions of adolescents adopt unhealthy habits that will lead to disease and death in later life

- Unprotected sex
- Physical inactivity
- Use of tobacco, alcohol & illicit drugs

Public health rationale – 4/4
sound reasons for investment for this generation

<table>
<thead>
<tr>
<th>Health problems / health-related behaviours during adolescence</th>
<th>Age when this has its major impact</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Adolescence</td>
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<tr>
<td>Injuries and violence</td>
<td>+++</td>
</tr>
<tr>
<td>Too-early pregnancy</td>
<td>++</td>
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<tr>
<td>Human Papilloma Virus infection</td>
<td>+</td>
</tr>
<tr>
<td>Tobacco use</td>
<td>+</td>
</tr>
<tr>
<td>HIV infection</td>
<td>+</td>
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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.
The need to act before the demographic transition closes doors.


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

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
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
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

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