The Global State of Adolescent Health

Accelerating Action for Adolescent Health: What else do we need to know?

Global Maternal and Newborn Health Conference, 2015

UNFPA

EVERY WOMAN EVERY CHILD

Outline

- The global state of adolescent health
- What is needed?
- Promising Programs

Leading causes of deaths among adolescents

- **INJURIES AND VIOLENCE:**

- 330 adolescents are dying every day in traffic accidents

- 180 adolescents are dying from inter-personal violence

- 50 % of sexual assaults are committed against girls under 16

- **MENTAL HEALTH AND SELF-HARM**

- Suicide, leading cause of death among adolescent girls 15-19

- Third cause of death among all adolescents 10-19 globally

Maternal mortality, second cause of death among adolescent girls globally

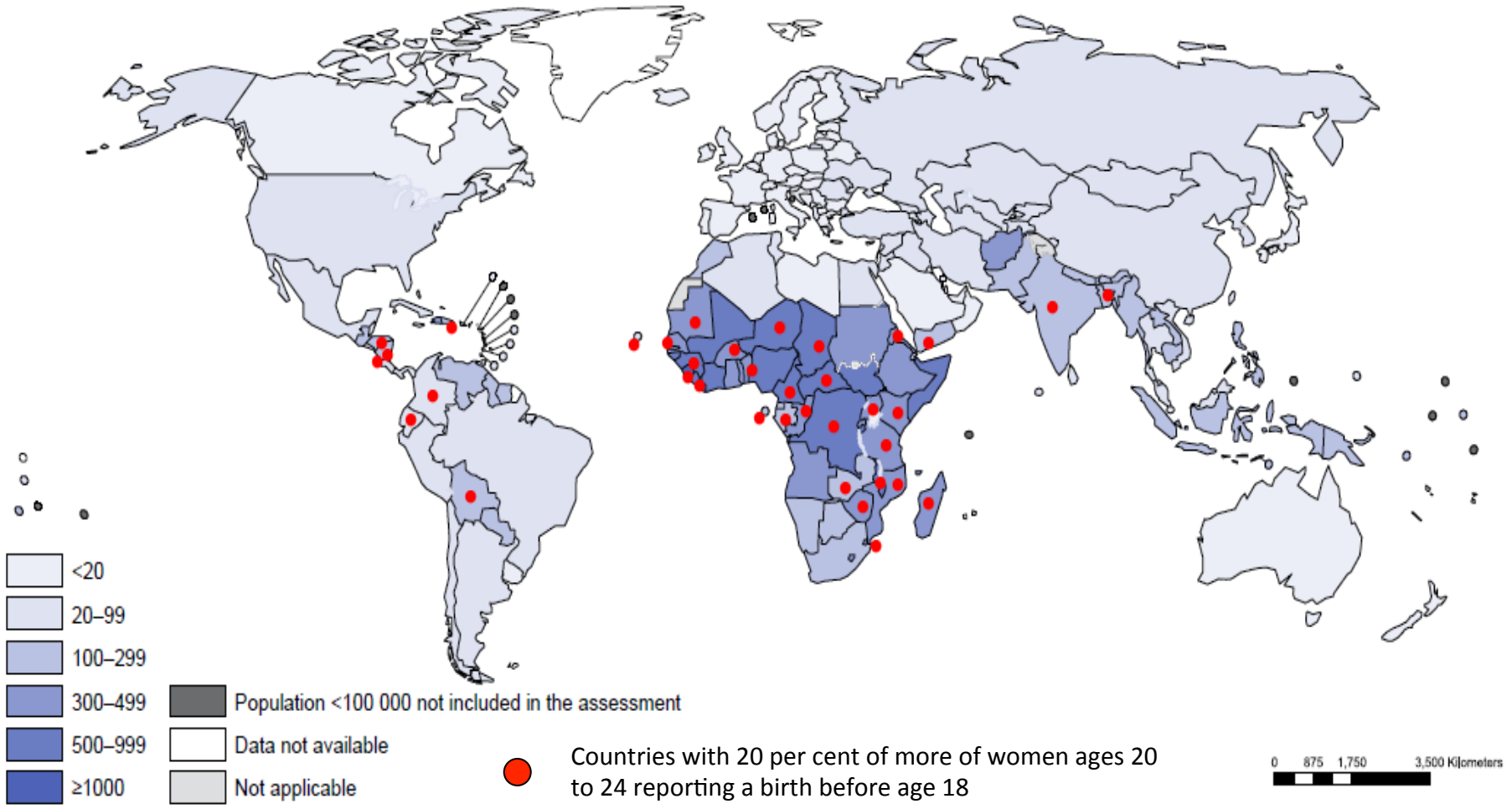
- 70,000 adolescents die annually from causes related to pregnancy and child birth

- The risk of maternal death for mothers under 18 in low and middle-income countries is double that of older females.
  - Girls under 14 years are five times more likely to die from complications.
  - Young adolescents face significantly higher rate of maternal morbidity, including obstetric fistulae.

- Early pregnancy also put newborns at risk (higher risks for the baby with younger mothers)

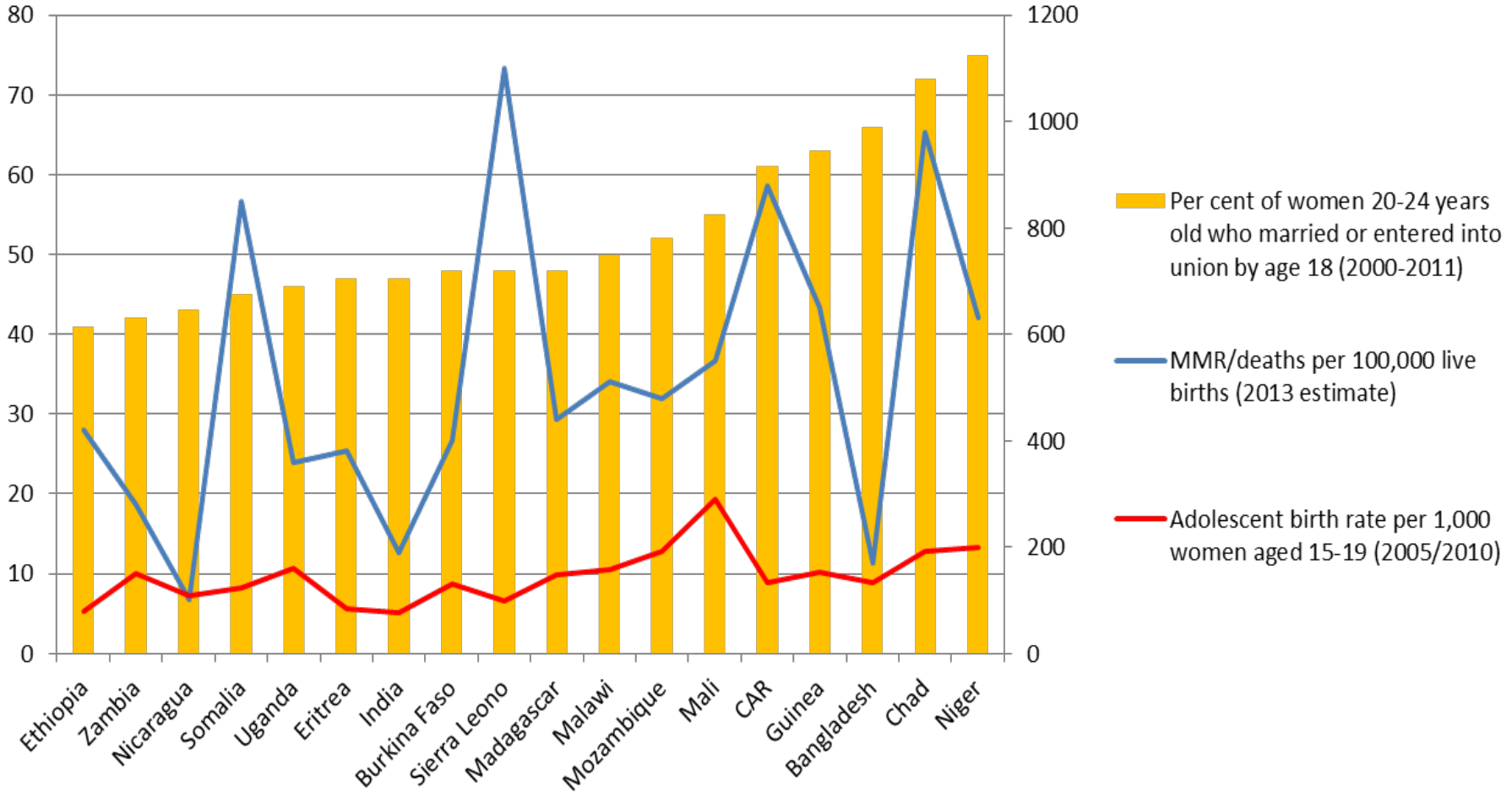
- 3.2 million unsafe abortions among girls 15-19 each year (Shah and Ahman, 2012)

MMR/100,000 live births, 2013



Sources: Trend in Maternal mortality: 1990-2013, Estimates developed by WHO, UNICEF, UNFPA and The World Bank, 2013 and UNFPA SWOP, 2013

Maternal mortality, adolescent pregnancy and child marriage



Per cent of adolescent girls in marriages, adolescent birth rates and maternal mortality rates (UNFPA, State of World Population, 2013 and UNFPA, Marrying Too Young, 2012)

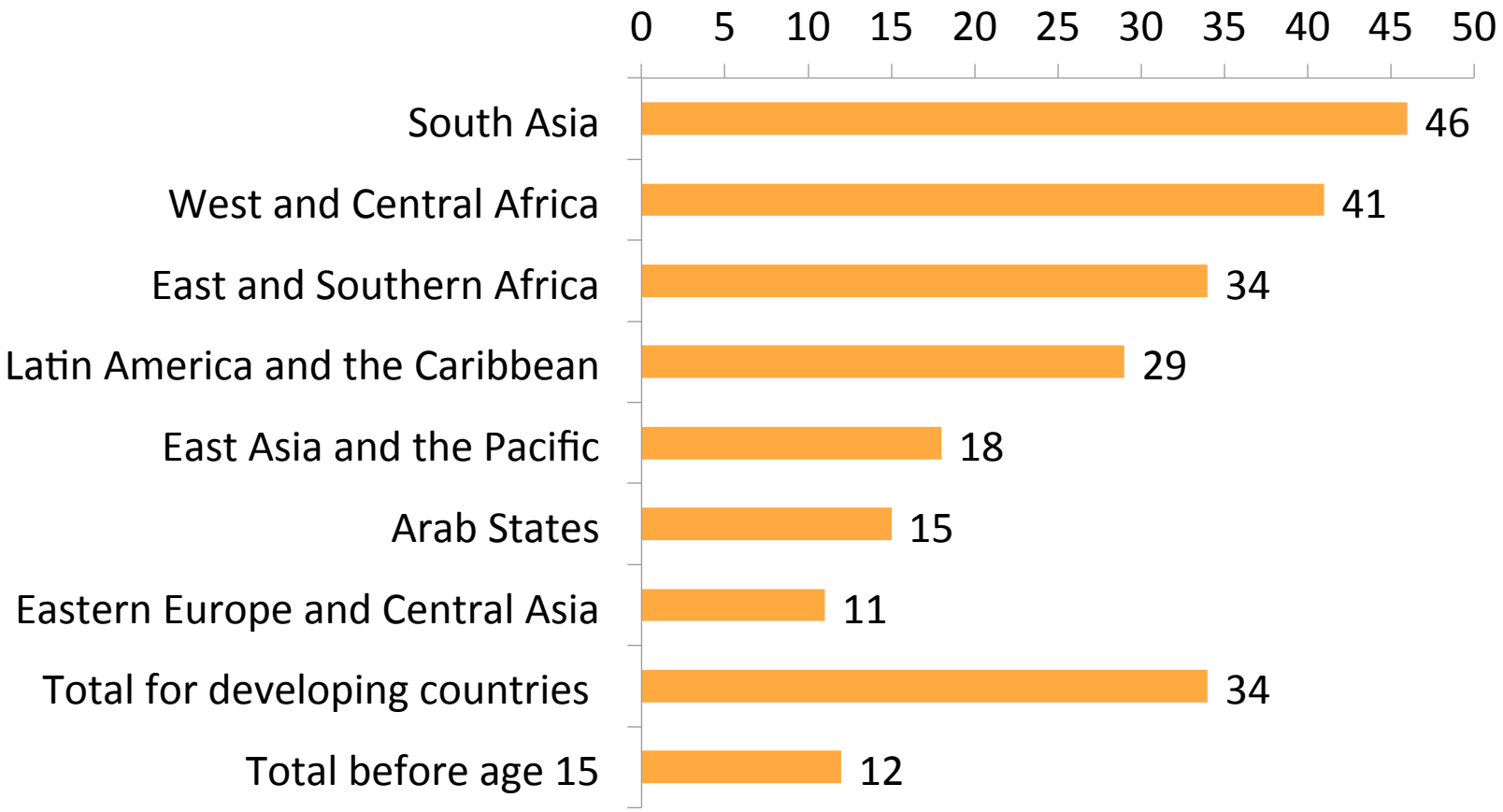
Early and rapid transitions

- In more than 30 countries, 10 per cent or more of adolescents have had sexual intercourse by age 15 (UNFPA SWOP, 2013)
  - Rates as high as 26 per cent in Niger

- Rapid cohort progression into marriage (and sexual activity) (UNFPA calculations, 2015)
  - Proportion married by age 15 (11%)
  - Proportion married by age 18 (34%)

How common is child marriage today?

Proportion of 20-24 year olds married before age 18



UNICEF's global estimates from 2014: 26% and 8% are married before ages 18 and 15 respectively

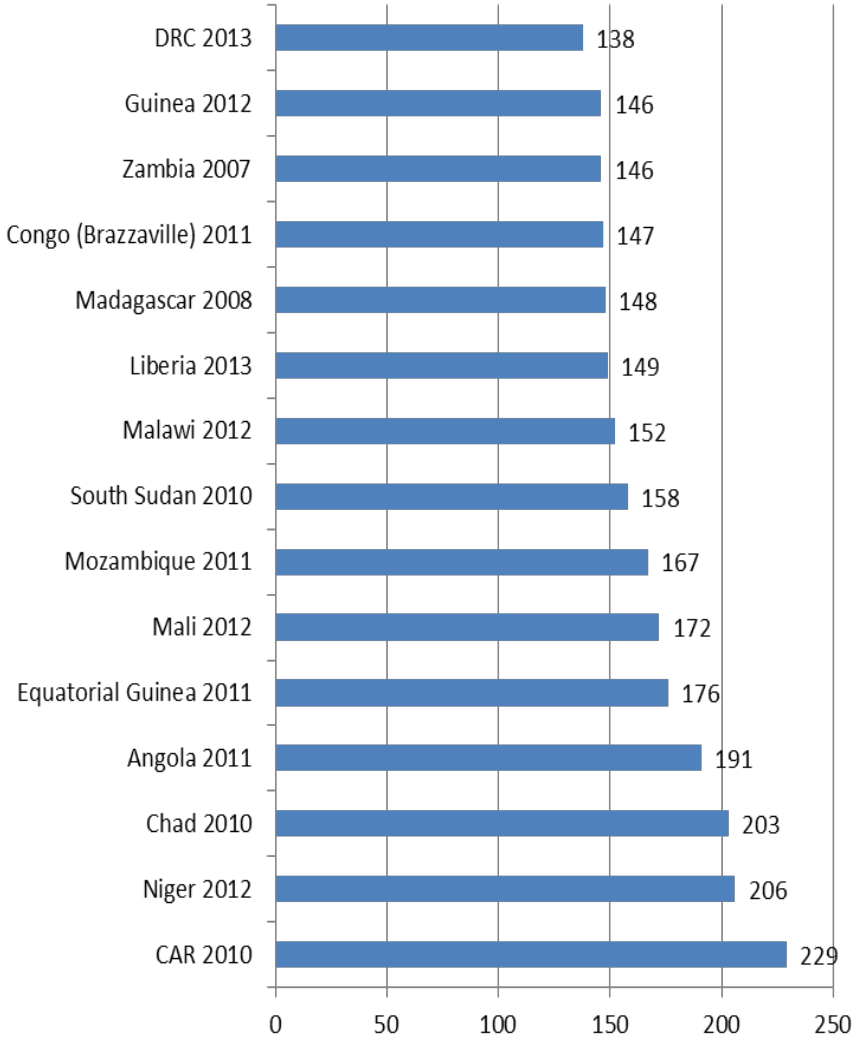
Sexual activity and marriage

- In 22 of 36 countries with data available (mostly African and Latin American), sexual initiation before marriage is more common than within marriage (UN Population Division, 2013)
    - However, data on sequencing not of the best quality, and simultaneity/jointness of the decisions cannot be ruled out
- That being said, most childbearing happens within marriage or union – 9 in 10 (WHO, 2008)

Adolescent childbearing

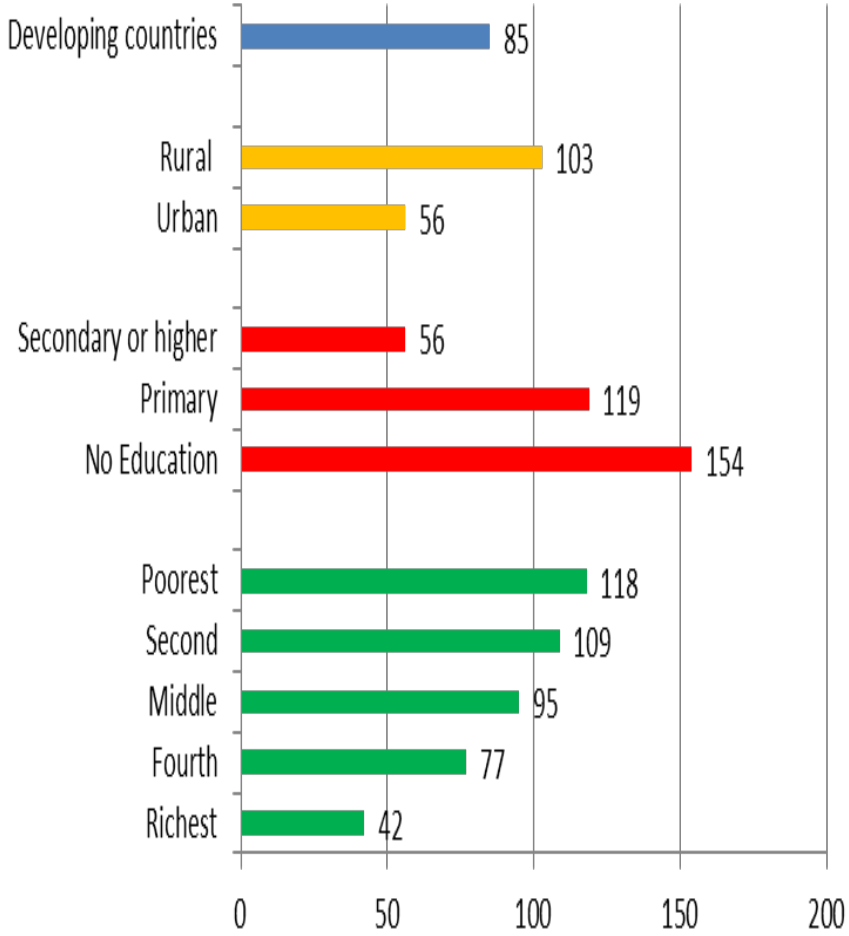
- 19 per cent of young women in developing countries give birth before age 18 (UNFPA SWOP, 2013)
- A total of 7.3 million births each year
- That's 20,000 girls each day
- Adolescent Birth Rate, births per 1000 women 15-19 (UNFPA SWOP, 2014)
  - 50 (world)
  - 113 (least developed)
  - 21 (more developed)

Adolescents pregnancy - Where does it happen?



Top 20 countries in Africa with highest adolescent birth rates

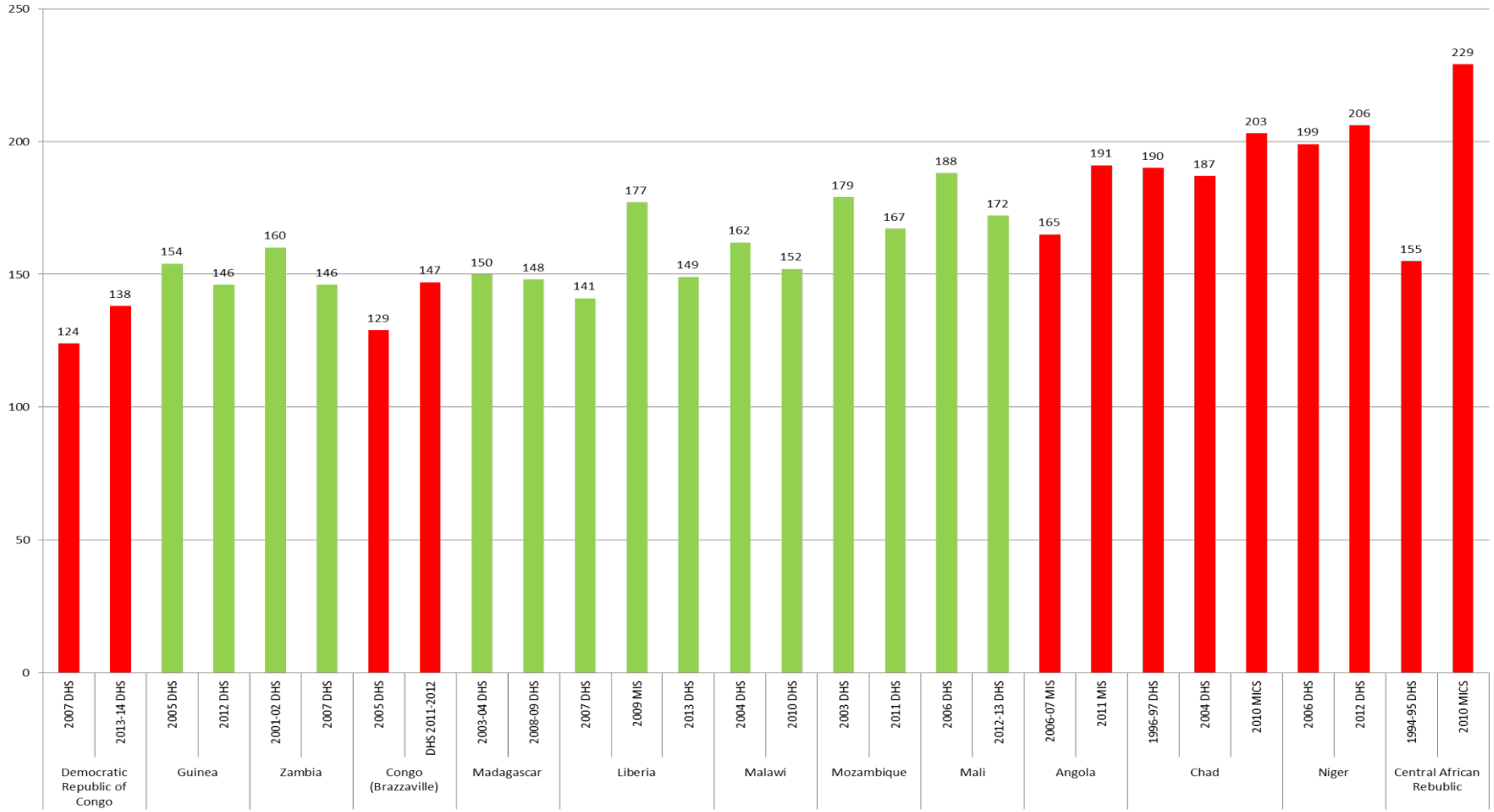
Source: Latest DHS, AIS or MICS



Adolescent birth rates, by background characteristics (data from 79 countries)

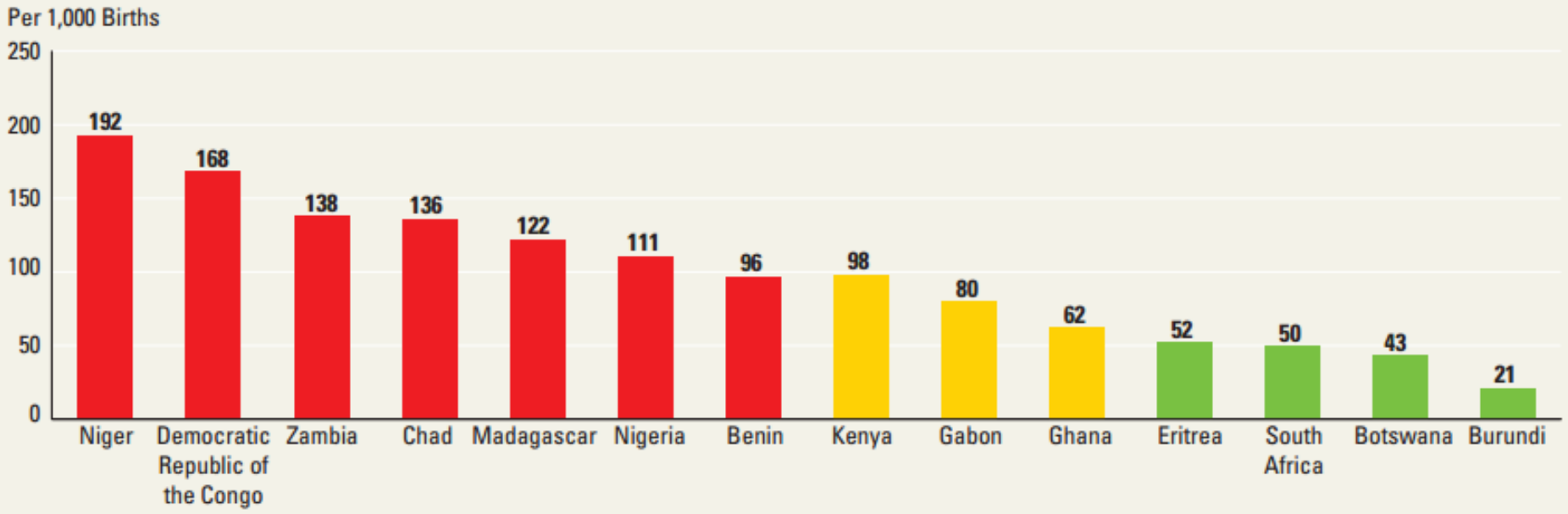
Source: UNFPA, State of World Population, 2013

Adolescent pregnancy
– some progress, but significant challenges remain



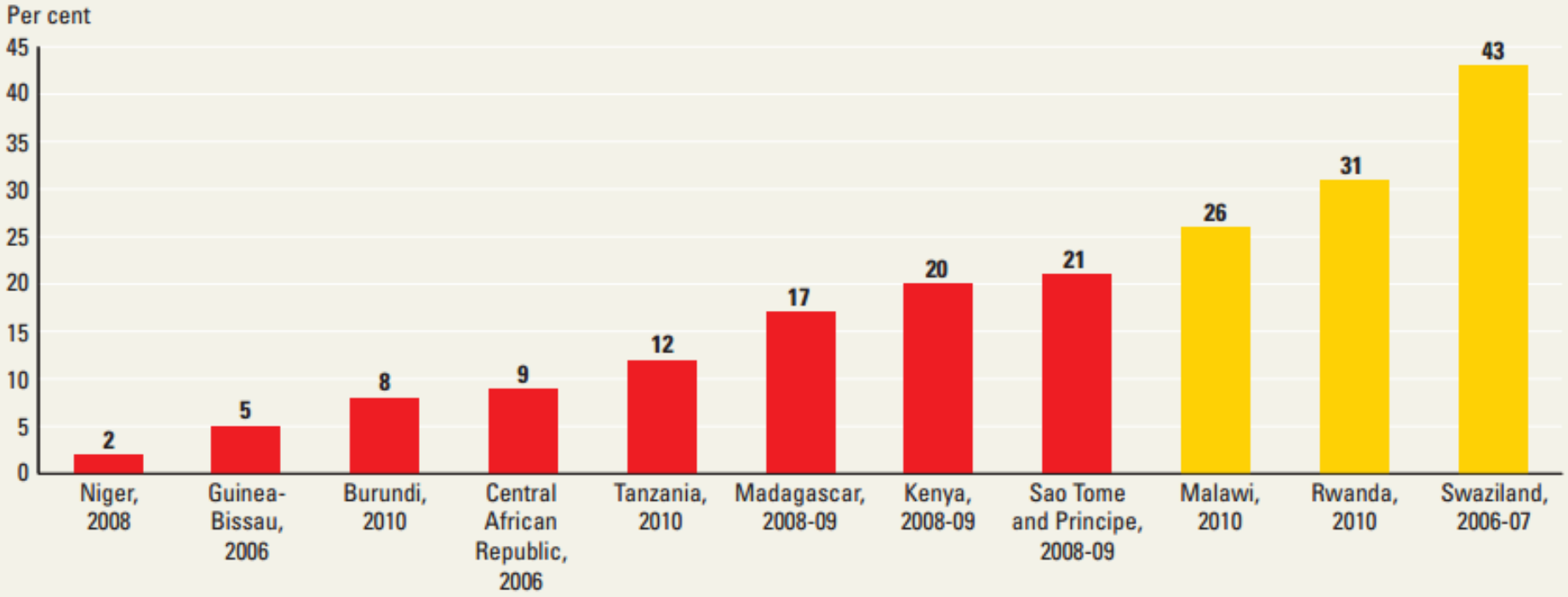
Source: Two/three most recent DHS/MICs in the countries with highest adolescent pregnancy rates

Adolescent Childbearing, Selected Countries, 2007-2011



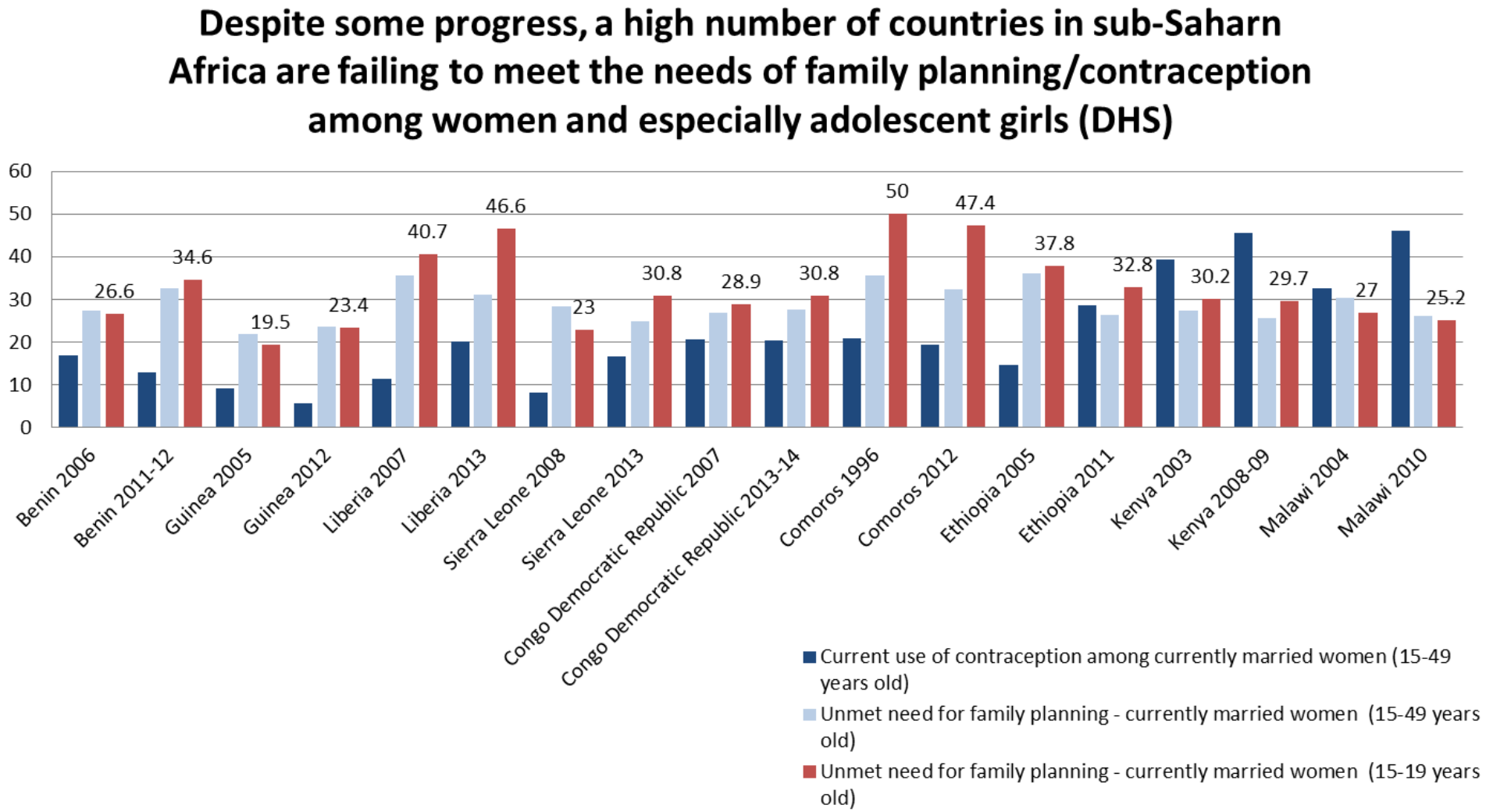
Source: United Nations Population Division, *World Population Prospects: The 2012 Revision.*

Modern Contraceptive Use Among Married Adolescents Aged 15-19, Selected Countries

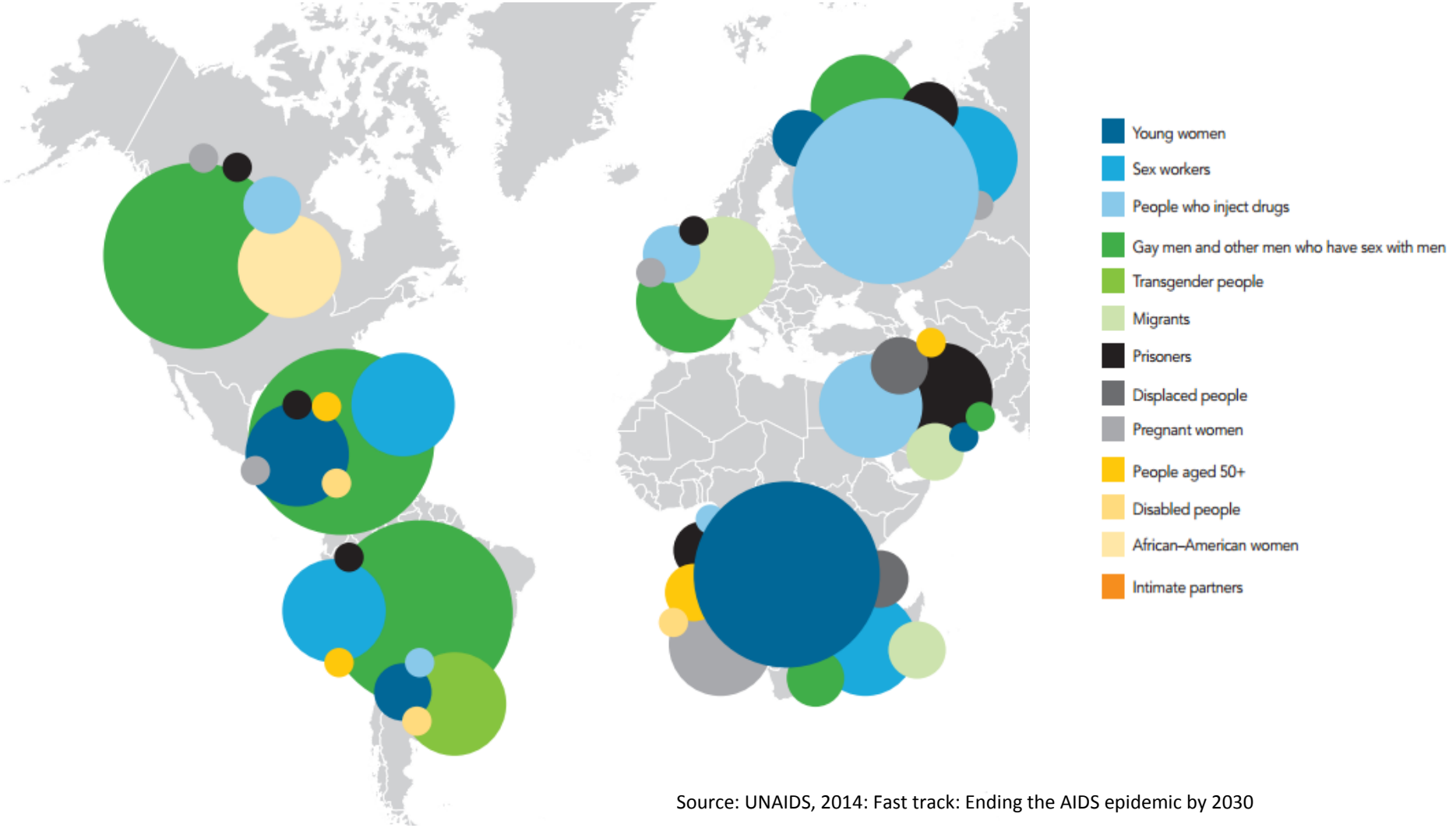


Source: ICF Macro, Demographic and Health Surveys 2005-2012.

Access to contraception



HIV



Source: UNAIDS, 2014: Fast track: Ending the AIDS epidemic by 2030

Young women are disproportionately affected by the HIV epidemic

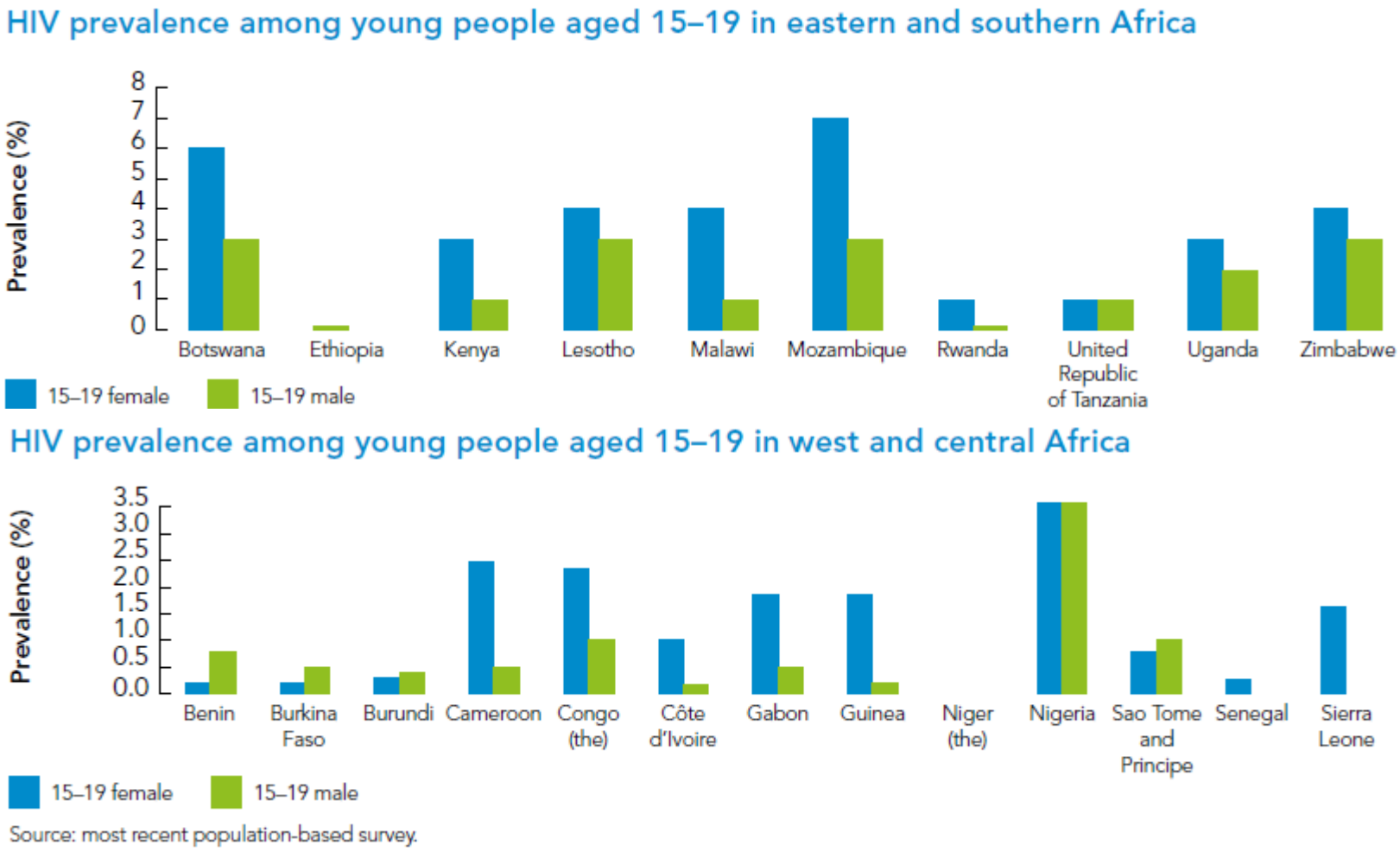
- Globally there are about 380 000 new HIV infections among adolescent girls and young women (10–24) every year.
- Globally, 15% of women living with HIV are aged 15–24, and 80% of them live in sub-Saharan Africa.

- In sub-Saharan Africa:
  - Women acquire HIV five to seven years earlier than men
  - Only 15% of young women aged 15–24 are aware of their HIV status
  - Only 26% of adolescent girls possess comprehensive and correct knowledge about HIV, compared with 36% of adolescent boys. In this context, according to UNICEF, among girls aged 15–19 who reported having multiple sexual partners in the past 12 months, only 36% reported that they used a condom the last time they had sex

- Adolescents (10–19 years) are the only age group in which AIDS deaths have risen between 2001 and 2012.

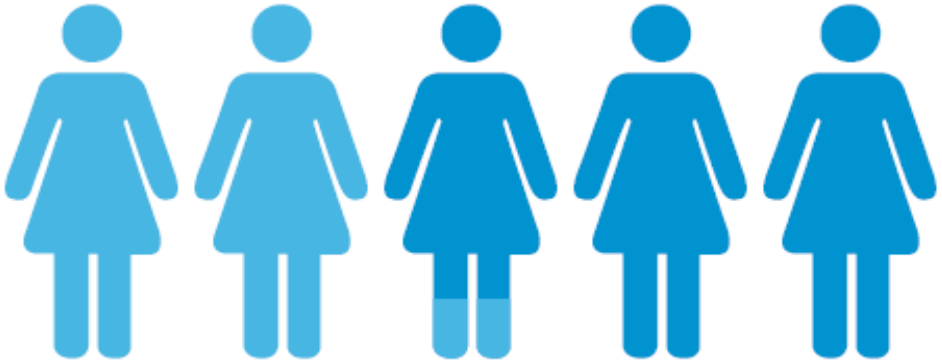
- AIDS-related maternal mortality is significant in the East and Southern Africa region, where in four countries it is recorded at over 50 per cent,

HIV Prevalence among young adolescents



Violence, abuse and exploitation: increasing risk and vulnerability

In some settings, up to 45% of adolescent girls report that their first sexual experience was forced



45%

Young women who experience intimate partner violence are 50% more likely to acquire HIV than women who have not.

Source: Multi-country study on women's health and domestic violence against women. Geneva: World Health Organization; 2005.

- Knowledge, skills and opportunities
- Voice, choice and control over their own bodies

Access to basic education and services

Health education including CSE

Quality health services including SRH

Supportive environment at home, communities, countries

Health, social and economic assets

Vision: ***Adolescents are surviving, growing, thriving, resilient, empowered, connected, central, and visible***

Younger adolescents (girls and boys ~10-14)

Older adolescents (girls and boys ~15-19)

Health

Health education including Comprehensive Sexuality Education

Health Servives, especially sexual and reproductive health services

Immunizations (HPV, tetanus booster, rubella, Hep B, measles)

Medical and psychosocial support for mental health problems and violence

Nutritional supplementation (eg: iron folate for girls) and nutrition care (eg: obesity)

Ensure visbility of adolescents through enhanced date collection and analysis

Non-health

Quality education and schooling through secondary level

Safe water and sanitation (at schools and homes)

Oppotunites for physical activity

Training in livelihood and wage employment skills

Eliminate child marriage and FGM/C

Opportunities for participation in decision-making

Protection from violence and judicial/legal support

Training in parenting skills

Ensuring visibility of adolescents through enhanced data collection and analysis

Policies & Laws

Access to quality, private, confidentail SRH and other critical services regardless of age, gender, marital or other status

Returning adolescents to school

Tobacco, alcohol, and food policies enacted and enforced to facilitate healthy behaviors

Minimum age at marriage universally set to 18

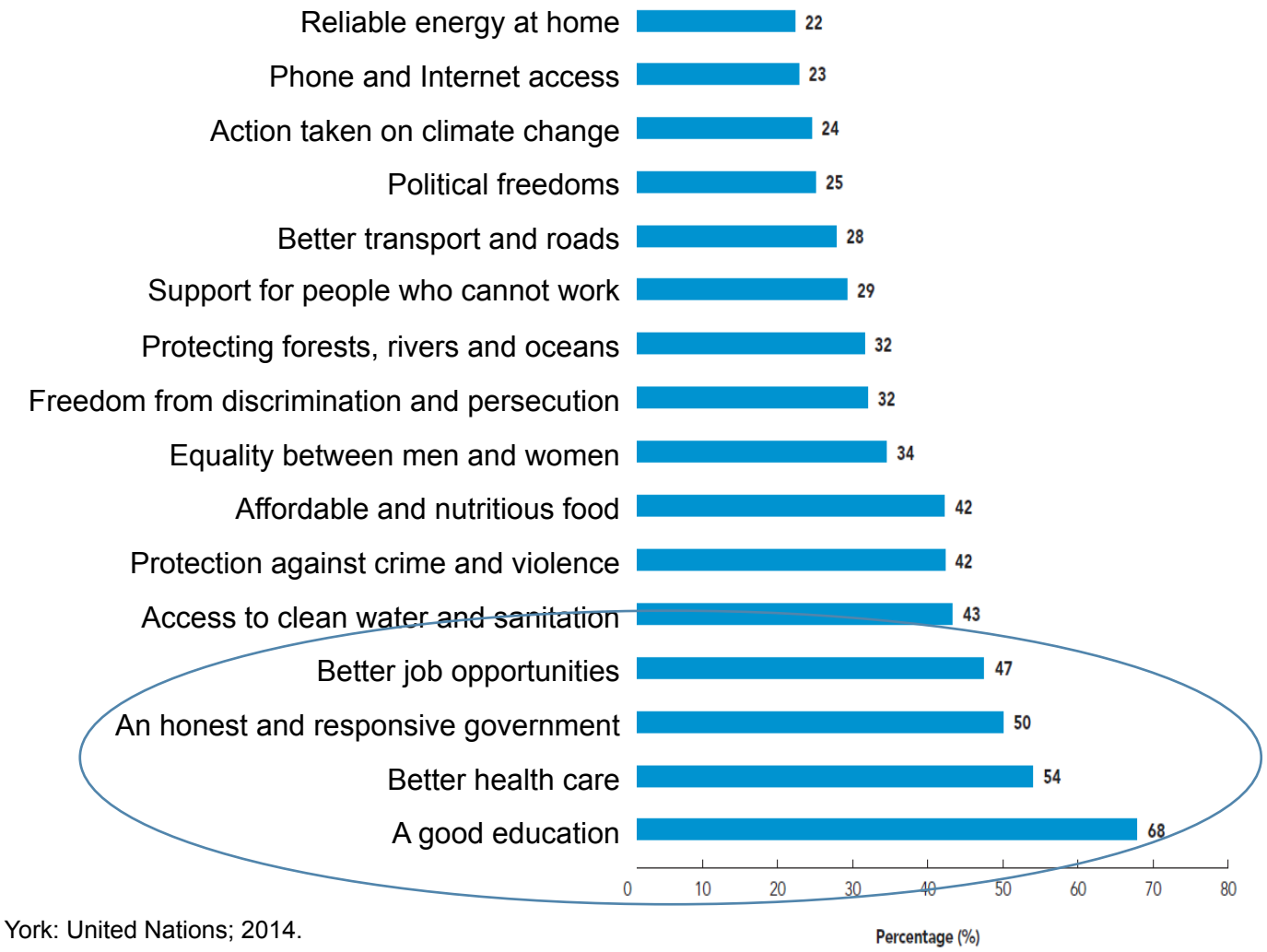
Mandatory birth and marriage registration

Surveys and censuses strengthened (eg: cross-sectional and longitudinal surveys) and age-sex disaggregated data utilized in policy formulation and program delivery

The future we want – Addressing the needs and rights of adolescents girls in the post-2015 development framework

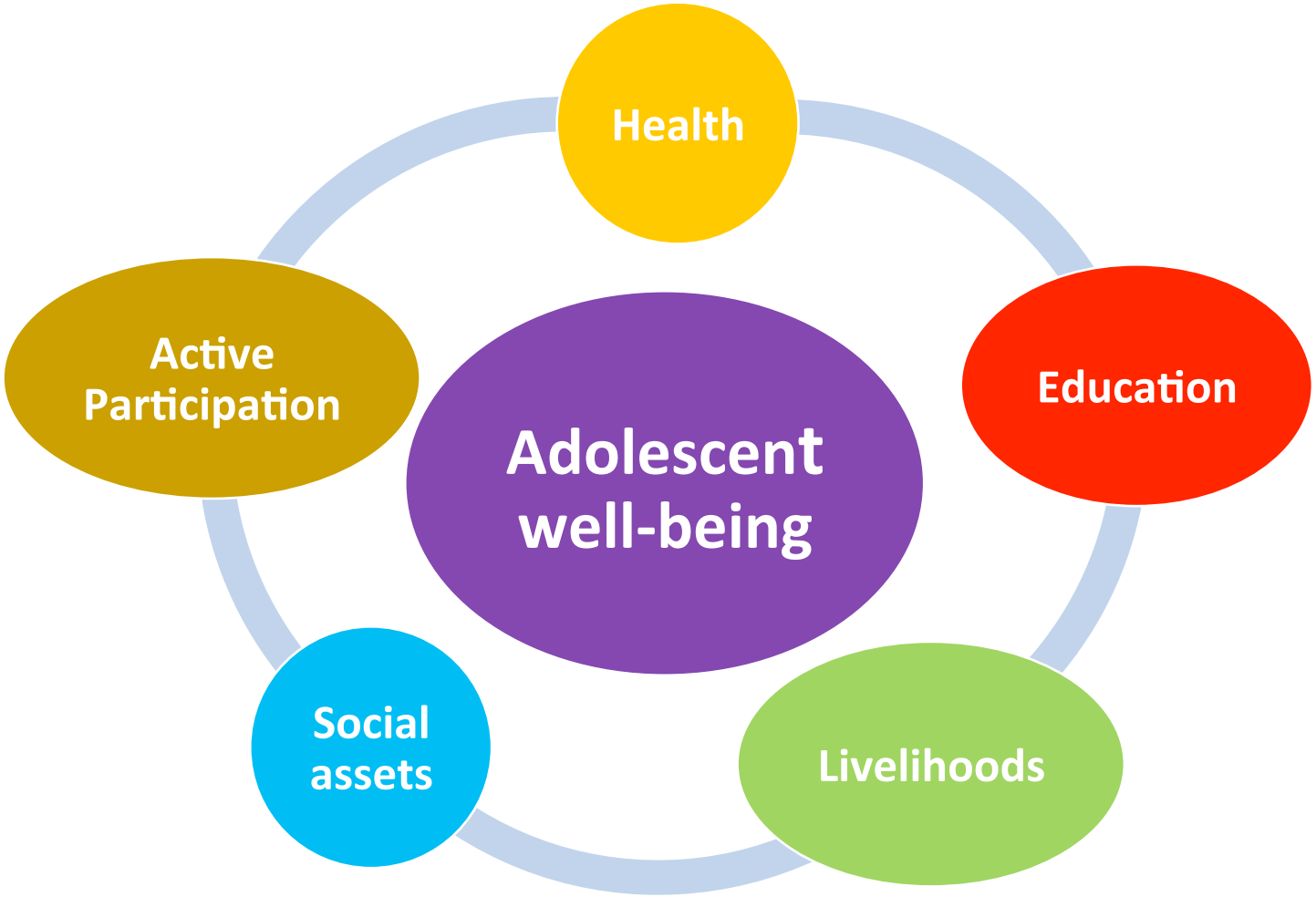
Percentage of votes by topic among women 16–30 years old at all education levels from all countries on their priorities

for the post-2015 development framework



Source: MYWorld Analytics. New York: United Nations; 2014.

A multisectorial framework for action



Policies and laws protecting the health of adolescents

- Remove third party authorization for SRH services
- Enact, enforce tobacco, alcohol, illegal substance abuse
- Revise and implement laws on child marriage

- Make adolescents visible for programme planning, implementation and evaluation

Addressing the determinants: non health interventions

- Quality education and schooling at least through the secondary level
- Water, sanitation and hygiene
- Delay marriage
- Physical activity
- Training and other investments
- Social protection
- Participation in decision making
- Parenting skills for parents of adolescents

Key Programmatic Principles

- Protect the human rights of all adolescents
- Respect their evolving capacities, and promote gender equality
- Recognize the diversity of adolescents
- Distinguish very young adolescents from older adolescents
- Support adolescents into the key transitions and promote “positive adolescent development”
- Ensure services and policies are evidence-based,
- Expand from a “disease-centric model” to one which is inclusive of prevention and health promotion
- Develop new measures and methods for measuring success
- Embark on a serious learning agenda on adolescent health

In countries:

- Alignment and coordination of multiple stakeholders at all levels is required
- Accountability mechanisms must be strengthened or built at national levels to ensure implementation

At the global level:

- A well-coordinated and aligned global platform is needed with the participation of all stakeholders
- The coordinating platform should benefit from the drive and energy for change brought about by global youth leaders and activists

Promising Programs

- Argentina, Program Sumar
- India, Adolescent Health Strategy
- Mexico, National Strategy to Prevent Adolescent Pregnancy
- Mozambique, Gerazcao Biz
- South Africa, new strategy on adolescent SRH

Thank you