Realizing the health and wellbeing of Adolescents
Leading causes of death among adolescents

Injuries and violence

Every day

330 adolescents are dying in traffic accidents

180 adolescents are dying from interpersonal violence

50% of sexual assaults are committed against girls under 16
Leading causes of death and disability among adolescents

Mental Health and Self-harm

**Depression** is the top cause of illness and disability in adolescents

**Suicide** is the leading cause of death among adolescent girls 15-19 and the third cause of death among all adolescents 10-19 globally
Leading causes of death and disability among adolescents

Communicable and non communicable diseases

Common infectious diseases (diarrhea, lower respiratory tract infections) are still killing adolescents

Adolescents who are sexually active have the highest rates of HPV infections
Leading causes of death and disability among adolescents

Maternal mortality and morbidity

Every day in developing countries 20,000 girls under aged 18 give birth

Maternal mortality is the second cause of death among adolescent girls

Around 11% of births worldwide or an estimated 16 million are to girls aged 15-19; 700,000 adolescents die annually from causes related to pregnancy and child birth
MMR/100,000 live births, 2013

Realizing the health and wellbeing of Adolescents

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?

<table>
<thead>
<tr>
<th>Region</th>
<th>Proportion of 20-24 year olds married before age 18</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Asia</td>
<td>46%</td>
</tr>
<tr>
<td>West and Central Africa</td>
<td>41%</td>
</tr>
<tr>
<td>East and Southern Africa</td>
<td>34%</td>
</tr>
<tr>
<td>Latin America and the Caribbean</td>
<td>29%</td>
</tr>
<tr>
<td>East Asia and the Pacific</td>
<td>18%</td>
</tr>
<tr>
<td>Arab States</td>
<td>15%</td>
</tr>
<tr>
<td>Eastern Europe and Central Asia</td>
<td>11%</td>
</tr>
<tr>
<td>Total for developing countries</td>
<td>34%</td>
</tr>
<tr>
<td>Total before age 15</td>
<td>12%</td>
</tr>
</tbody>
</table>

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)
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

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

<table>
<thead>
<tr>
<th>Country</th>
<th>Year</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niger</td>
<td>2008</td>
<td>2</td>
</tr>
<tr>
<td>Guinea-Bissau</td>
<td>2005</td>
<td>5</td>
</tr>
<tr>
<td>Burundi</td>
<td>2010</td>
<td>8</td>
</tr>
<tr>
<td>Central African Republic</td>
<td>2010</td>
<td>9</td>
</tr>
<tr>
<td>Tanzania</td>
<td>2010</td>
<td>12</td>
</tr>
<tr>
<td>Madagascar</td>
<td>2008-09</td>
<td>17</td>
</tr>
<tr>
<td>Kenya</td>
<td>2009-09</td>
<td>20</td>
</tr>
<tr>
<td>Sao Tome and Principe</td>
<td>2008-09</td>
<td>21</td>
</tr>
<tr>
<td>Malawi</td>
<td>2010</td>
<td>26</td>
</tr>
<tr>
<td>Rwanda</td>
<td>2010</td>
<td>31</td>
</tr>
<tr>
<td>Swaziland</td>
<td>2006-07</td>
<td>43</td>
</tr>
</tbody>
</table>

Source: ICF Macro, Demographic and Health Surveys 2005-2012
Leading causes of death and disability among adolescents

HIV and AIDS

An estimated **2.1 million** adolescents (10-19) were infected with HIV in 2013.

Adolescents, especially girls, are the only population group for which AIDS relates deaths are not falling.
Interventions to protect and promote health of adolescents

...need to ensure that adolescents have voice, choice and control over their bodies and are enabled to develop the capacities required for a productive, healthy and satisfying life.
Interventions to protect and promote health of adolescents

Need to focus on
- reducing adolescent death and mobility
- creating a supportive legal and social climate for positive adolescent development
Interventions to protect and promote health of adolescents

Priority actions

• Health education including comprehensive sexuality education
• Access to and use of integrated health services
• Immunization
• Nutrition
• Psychosocial support
Creating health systems suited to adolescents

Health systems responsive to adolescents:

- Health care workers are trained and supportive of protecting adolescents’ privacy and confidentiality and treat them with respect.
- Outreach and non facility based services reach hard to reach adolescents.
- Standards for quality adolescent health care are set.
- Financial and legal barriers are addressed.
Non health sector interventions

Economic, sociocultural, biological, physical, environmental, legal and policy factors

- Quality education at least to secondary level
- Safe water and sanitation
- Role of parents
- Support for victims of harmful practices and violence – Child Marriage
- Participation in decision making
Policies and laws protecting the health of adolescents

Enable access to health services
Control exposure to unhealthy products
Revise and implement laws on child marriage
Make adolescents visible in policy formulation and monitoring
Building a new monitoring framework

The Global Strategy on Women’s, Children’s and Adolescent’s health convenes and leads countries in a global call to action on indicators related to adolescent health.

Measurement of health targets in adolescents aged 10-14 and 15-19
Conclusion

The Global Strategy on Women’s and Children’s and Adolescent's Health and the SDG targets related to adolescents provide an unprecedented opportunity to step up efforts to realize the health and wellbeing of adolescents worldwide.
Conclusion

Investing in adolescent’s health and development is key to improving their survival and wellbeing and critical for the success of the 2030 Agenda.
Global Strategy for Women’s, Children and Adolescent Health

Thank You!