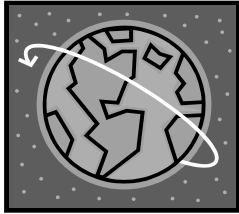


Reproductive Health in Developing Countries



Adolescents: taken more seriously?

- UN General Assembly Special Sessions:
 - Drugs (1998)
 - HIV/AIDS (2001)
 - Children (2002)



Demographic Health Surveys (DHS)

More adolescents than anytime in recorded history

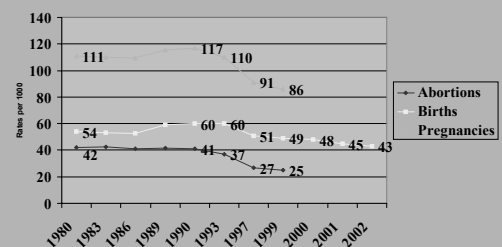
- 1.2 billion 19 19
- 1.7 billion 19 21
- 20 25% of world's population
- 86% in developing countries

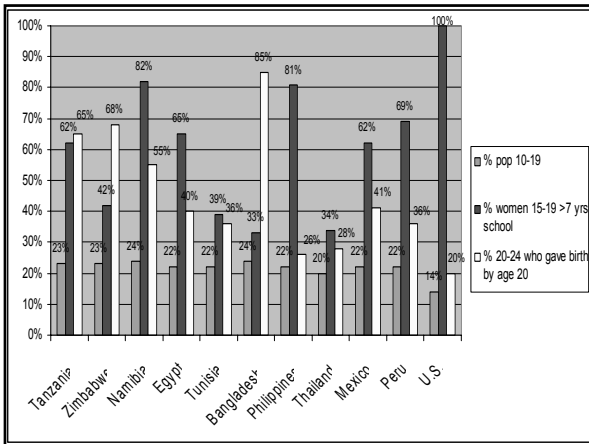


Sexual activity and outcomes vary by region

- 71% U.S. females/81% males sexually experienced by age 20
- Puberty earlier, marriage later, premarital sex more common
- pregnancy rates declining in many countries
- 33% give birth <20 in developing countries (20% U.S.)
- highest rates of STIs= 15-24 year olds

Trends in Pregnancy, Birth and Abortion Rates per 1,000 Females 15-19, USA





HIV/AIDS

- 12 million 15-24 living with HIV/AIDS
- 6,000 infected daily
- Account for >1/2 new infections
- 62% female
- >20% in many sub-Saharan
- rates 2nd highest in Caribbean
- Why:
 - Info?
 - Skills?
 - Societal norms & practices?
 - Access to youth friendly services?
 - Policies?

% of Non-voluntary (forced) and Unwanted Sex, by age, United States



Sexual abuse & violence in Sub-Saharan Africa

- estimating prevalence difficult
- regular physical abuse of young women: Uganda (46%), Tanzania (60%), Kenya (42%), Zambia (40%)
- ½ of sexual assaults against girls <15
- boys also (15% Ugandan boys)
- effects on women & children who witness
- social stigma prevents speaking out

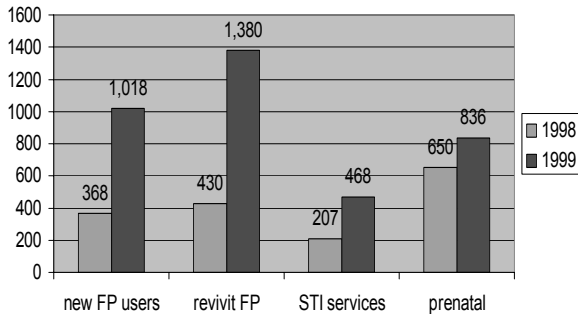
Barriers to RH care

- Lack info (e.g. not at risk, myths, unaware)
- Stigma (males & females)
- Provider attitudes & skills
- Concerns about confidentiality
- Logistics
- Policies
- Social/cultural barriers (seek permission)

What are “Youth Friendly” RH Services?

- Visible
- Clinical/program environment
- Staff attitudes (training, supervision, monitoring)
- Convenient hours/location
- Affordable
- Full range of RH care
- Policies & procedures (protocols, guidelines)
- Youth involved @ all stages
- Sensitive to gender norms

10-24 year olds use of RH care after intro youth friendly services, Lusaka, Zambia



Beyond Clinics

- Pharmacies
- Kiosks
- Retail stores
- Youth Centers
- School/Clinic links
- Mass media/theatre

Public Health Advocacy?

An effort to change public perceptions about an issue and influence policy decisions and funding priorities

Takes many forms

Strategic Steps

- Needs assessment
- Goals & objectives
- Collaborations
- Involve youth
- Educate public (media)
- Persuade policy makers
- Anticipate/respond to opposition
- Evaluate results & adjust

Needs Assessment

- Assess health status of target youth in specific community
- Gather info on availability & utilization of services, including gaps & barriers
- Assess local, national, regional, institutional policies that affect availability & utilization

I. Assess Needs

- % sexually active
- Birth, STI rates
- % using contraception
- Mean age marriage, first birth
- Maternal/infant mortality rates
- Substance abuse rates
- Incidence of sexual violence
- School drop out rates
- Number of street youth
- % youth enrolled in primary & secondary school

II. Assess Info & Services

- What RH services exist?
- Are services available? Youth friendly?
- What services not available?
- How many use RH each month? Year?
- Transportation available?
- What barriers to accessing?
- Extent/quality of school RH education?
- Do some groups receive/others don't?
- Any medial campaigns?

III. Assess Policies

Obtain Data

- **Public health surveillance**
- **Local health, education & social service providers**
- **Surveys**
- **Focus Groups**

Assess & Rank Needs

- **Severity**
- **Frequency/prevalence**
- **Social & economic consequences**
- **Amenable to change**
- **Feasibility, capacity to affect change**

Examples of Public Health Policy Advocacy

- **Increase funding**
- **Change laws/policies**
- **Encourage public/private collaborations**
- **Revise internal policies & procedures**

Realistic, specific, measurable objectives:

“increase by 25% the funds allocated by Ministry of Health to adolescent reproductive health programs within five years”