Preface, Using This Handbook

Adolescents are the forgotten millions in reproductive health programs. Although the numbers of young people who need information and services are enormous, services are scarce, fragmented or nonexistent.

This manual will help service providers and health workers strengthen the reproductive health care and services offered to young women and men. The focus is on two important aspects of reproductive health:

- Prevention of unplanned pregnancies.
- Prevention of sexually transmitted infections (STIs), including HIV/AIDS.

It can also be used as a tool for designing, improving and implementing adolescent health programs by:

- Health workers. (We use the terms "health worker" and "service provider" interchangeably in this document.)
- Workers in nongovernmental organizations (NGOs) that offer health services to young adults.
- Program managers and planners.
- Health educators who work with youth.

This manual emphasizes that:
Adolescents both male and female have a right to accurate reproductive health information and quality services.

Adolescents are capable of making informed choices about whether to use contraception, which methods to use and how to prevent STIs.

All contraceptive methods are medically safe for adolescents, although some may be more appropriate for this age group than others.

Reproductive health is a lifelong process the decisions young people make have an impact on their current and future health.

Young people view sexual issues in the context of the larger social, cultural and economic climate in which they live.

AIDS is a real threat to young people. Because there is no cure, prevention is key.

The following chapters will:

- Explore the vast need for adolescent reproductive health services.
- Identify the barriers young people encounter in obtaining health care, including service providers' attitudes about adolescent sexuality.
- Provide updated information on pregnancy and STI prevention, post-pregnancy services and other reproductive health issues.
- Provide guidance on counseling for adolescents.
- Consider ways in which family planning programs can better meet the health-care needs of young women and men.

**Section I** provides background information on adolescents' needs and technical information on contraception, STIs and HIV/AIDS. **Section II** focuses on service delivery, particularly counseling. As you read this manual, remember that young people need a variety of reproductive health services. Integrating contraceptive services, STI prevention and treatment programs and prenatal care will help young people receive the comprehensive services they need.

At the end of each chapter are questions for health-care providers and program managers. These questions are designed to help you:

- Identify services already in place for young people.
- Evaluate what works well in your community and what does not.
- Develop new approaches to close gaps in service delivery.

You may answer the questions individually or discuss them with colleagues or other program staff. Space has been provided at the end of the handbook for your answers and for other note-taking.

**Chapter 1 Adolescents: An Underserved Population**
Adolescence is the transition from childhood to adulthood, marked by profound physical, emotional, mental and social changes.

In this manual, we define adolescence as the time period from ages 10 to 24. We use the terms "adolescents," "youth," "young adults" and "young people" interchangeably. In such a broad age range, reproductive health needs can vary greatly. The needs of a 10-year-old who has not yet reached puberty and who is not sexually active will be considerably different from those of an 18-year-old who is newly married, or a 24-year-old with two children. As a health-care provider, you should individually assess the reproductive health status, goals and needs of each adolescent.

Change is the hallmark of adolescence. Physical changes, such as growth of facial hair for boys and onset of menstruation for girls, take place during puberty, which occurs mostly from ages nine to 14 for boys and ages eight to 13 for girls. Emotionally, young people move toward independence from their parents or elders and establish new interests and relationships.

As adolescents become adults, they consider sexual relations, marriage and parenthood as signs of maturity. They seek information and clues about sexual life from a variety of sources: parents, peers, religious leaders, health providers, teachers, magazines, books and mass media. While youth receive a wealth of information from diverse sources, a good deal of that information is incorrect, incomplete or misleading.

Adolescents obtain information and make decisions within the context of the culture in which they live. Decisions and actions may be affected by violence, drug and alcohol use, school attendance, work, economic opportunities, self-image and autonomy in decision-making.

As a service provider, you can be a valuable source of accurate information for young women and men. You can offer facts and reassurance, answer questions and provide a variety of health services.

"You have to invest in education for young people. Especially sexuality education."

Health project manager in Haiti

There are two main reasons reproductive health programs should offer information and services to adolescents:

"We believe that information should be given as early as age 10 to 12 because they are practicing sex at an early age."

Peer health educator in Ethiopia
Meeting the Needs of Young Clients

- Young people have a right to quality reproductive health services.
- Young people need reproductive health services.

Adolescents' needs for reproductive health services are often misunderstood, unrecognized or underestimated. Consider:

- Nearly half the world's population is under age 25.
- Adolescents account for approximately 10 percent of all births worldwide. Each year 15 million girls ages 15 to 19 have babies.
- Girls under 16 years old are twice as likely to die in childbirth as women in their early twenties.
- Two to four million adolescents in developing countries have unsafe abortions each year.
- Eleven percent of young women ages 15 to 19 have an unmet need for contraception.
- Nearly half of all HIV infections worldwide occur in people under age 25.
- Seven in 10 new STIs occur among individuals 15 to 24 years old.

Young people's reproductive health needs vary. Depending on their individual situation, they may need:

- Skills and motivation to help them postpone sex.
- Information, skills and contraceptives to protect themselves against STIs and unplanned pregnancies.
- Counseling to encourage them to change risky behaviors.
- Information to help them delay and space pregnancies.
- Information about and support for prenatal care, child nutrition and breastfeeding.
- Information and support during labor and delivery.
- Protection from violence, forced sex or sexual coercion.

Health services can help adolescents:

- Protect and improve their current health.
- Understand their sexuality and reproductive health needs.
- Learn to take active responsibility for their reproductive health.
- Prevent unplanned pregnancies.
- Prevent serious health problems and premature deaths due to complications from a too-early pregnancy or an unsafe abortion.
- Avoid STIs.
- Make informed choices about reproductive health.
- Ensure a healthy future.
Questions for Providers and Program Managers about Underserved Adolescents

? How is adolescence defined in your community?

? Where do adolescents in your community obtain information about sexuality and reproductive health? Who are the most credible sources of information? Do adolescents receive most of their information from these credible sources?

? What percentage of your clients are adolescents?

? What percentage of adolescent clients are married? What percentage are unmarried?

? What reproductive health services do you think adolescents in your community need?

? What types of services do you offer for adolescents? Do you offer education, services or both?

Chapter 2, Barriers to Good Reproductive Health Care

"We are adolescents who don't have the courage to go to family planning centers to talk about such things."

Young man in Senegal

Adolescents' reproductive health needs are immense, but so are the obstacles young people face in trying to maintain good reproductive health. Lack of knowledge, information and services all create barriers.

Young people may be at risk for reproductive health problems because they:

- Lack knowledge and information.
- Lack access to services and programs.
- Are limited by psychological or social barriers.

Lack of knowledge and information

- Young people lack basic knowledge of reproductive anatomy and physiology, how pregnancies or STIs occur, how to prevent them and where to obtain protection.
- Parents may feel ill-prepared, uncomfortable or embarrassed to talk about sex with their children.
Well-meaning parents and other adults, eager to protect their children, may believe that education about sexuality and reproductive health will encourage young people to become sexually active.

"I tried hard to get some tablets, but I was chased from the clinic. I think it was because I looked very young at the time."

_University student in Zimbabwe_

**Lack of access to services and programs**

- Youth may have little or no money to pay for services, lack transportation or do not know how to use services.
- Health workers may hold judgmental attitudes toward adolescent sexual activity.
- Health workers may not have up-to-date scientific information on contraceptive safety for adolescents.
- Health clinics may not be open at hours that are convenient for young people.
- Clinics often are designed for married women rather than single women, men or adolescents.
- Requirements for medical tests and pelvic exams may discourage young people from seeking contraception.*
- National health policies may present legal barriers to youth seeking reproductive health information or services.

* In most cases, medical tests are not necessary for contraceptive use. A pelvic exam is necessary for diaphragm fitting and intrauterine device (IUD) insertion. However, pelvic exams, laboratory tests and breast exams are not essential for the use of pills, injectables, implants, most barrier methods or natural family planning. Blood pressure checks are advisable before pill use.

**Psychological or social barriers**

- Adolescents may be afraid to admit they are having sex.
- They may hold unrealistic views of individual pregnancy and STI risks the "it cannot happen to me" syndrome.
- They worry that contraception will damage their health and future fertility.
- They are vulnerable to sexual violence, coercion and abuse.
- Girls may be reluctant to discuss reproductive health issues, fearing knowledge will be interpreted as promiscuity.
- Boys may be reluctant to ask questions about sexuality, fearing that lack of knowledge will mean loss of status among their peers.
- Motherhood may be a means for girls to gain status and respect in their families and communities.
• Sexual activity is often seen as a way for boys to gain status among their peers.
• Sex is a survival tool for young people who live on the street or who are poor.
• They fear they will be shunned or stigmatized if they admit homosexual or bisexual behavior or desires.
• Young people may be afraid or embarrassed to seek help for rape or incest.
• Mass media tend to emphasize fun but not responsibility or consequences of sexual behavior.

Questions for Providers and Program Managers about Barriers to Reproductive Health Care

? What obstacles do young people in your community face in trying to obtain health information or services?

? How can you educate and inform young people in your community about reproductive health?

? How can you educate and inform adults in your community about young people's reproductive health needs?

? What internal policies in your clinic or program discourage young people from seeking reproductive services? How can these policies be modified or removed?

? What national policies discourage provision of information and services to young people?

? How do gender norms societal views on what is appropriate behavior for women and men affect young women's access to health services? How do they affect young men?

? What can your clinic do to help minimize or eliminate barriers to adolescent health education and services?

Click to select preferred language, if other than English: French | Spanish.