

# Breaking the Silence

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Preventing HIV/AIDS in Latin American and Caribbean Adolescents and Youth



## Adolescent Health Services: Why have them?



Adolescents, who comprise approximately one-third of the population in Latin America and the Caribbean, need special consideration. Beginning risky behaviors such as substance abuse and unprotected sex at an early age, in combination with the fact that adolescents are a group commonly overlooked by health care systems, represents a burden for families, communities, health care systems and adolescents themselves that could easily be prevented.

For example, adolescent pregnancy rates are high, and consequently, complications of pregnancy, puerperal conditions and abortion are the primary causes of adolescent female deaths in the Region. To create a healthy and productive generation, good health must be assured to all adolescents.

• **Becoming sexually active at an early age, 50% of sexually active adolescents do not use a form of contraception**

• **One in ten adolescents lives with a sexually transmitted infection**

• **Between 20 and 35% of HIV/AIDS cases are in young people 10-24 years of age**

## What Adolescent Health Services Currently Exist?

Past approaches to adolescent health services reveal the need not only for political action and support (policies and laws), but also for understanding adolescent, family, and community needs, expectations and past experiences with the system. Many countries in Latin America and the Caribbean have established comprehensive health services for adolescents in a variety of settings, including hospitals, community-based health centers, schools, community centers, NGOs and other organizations.

- The Adolescent Health Services at the Hospital de Niños Ricardo Gutierrez in Buenos Aires, **Argentina**, provided specialized services ensuring privacy and confidentiality (WHO 2002)
- **Mexico's** *Gente Joven* program provided health services to adolescents and disseminated sexual health information and materials to poor rural and urban neighborhoods (JOICFP 1999)
- **Costa Rica's** National Adolescent Health Program enhanced the school health system by providing sexual education, a telephone hotline and counseling trainings for nurses (WHO 2002). Additionally, the Ministry of Health has begun using evaluation methodologies to ensure that services are following norms and guidelines in youth health
- **Panama's** National Program of Adolescent Sexual and Reproductive Health provided information and counseling and created a campaign with an emphasis on STI/HIV/AIDS, pregnancy prevention and reproductive health rights, which resulted in 2002 legislation guaranteeing health and education of pregnant adolescents (2003 Honduras meeting)
- **Nicaragua's** National Center for Adolescent Reproductive Health used a broad topical approach training more than 7,000 adolescents and youth to create a network of peer education promoters for rural areas (UNFPA 1997)
- The National Program of Comprehensive Adolescent Health in **Honduras** focuses on mental health issues such as violence and substance abuse as well as sexual and physical health (2004 Costa Rica conference)

Taking a step in the right direction, program directors consider adolescent participation and input to be essential, making sure adolescents are satisfied with the criteria for quality of care within the programs.

# What are Some Essential Components of Adolescent Health Services?

National programs generally contain health care for adolescents within their services, which vary from country to country, program to program and hospital to hospital. A systematic way to analyze the adaptation of health services to adolescent needs and expectations is by using PAHO's Guide for the Evaluation of Quality Services for Youth and Adolescents which presents the following essential components: **model of care, organization, management, and monitoring and evaluation.** The model of care measures the extent to which the range and type of services are specific to adolescents' age, gender, living environment and ethnicity. The organization of health services appraises health services efficiency and integration in meeting the needs of adolescents. Management of health services assesses the effectiveness of the services, consumer satisfaction and involvement. Monitoring and evaluation processes measure implementation, quality and impact of services using the criteria for the aforementioned components.

Countries present at the Costa Rica Conference on Health Services for Adolescents in July 2004 reviewed and self-evaluated program components using the guide. Most country programs demonstrated the necessary elements in the model of care and organization components, though very few had university curricula in adolescent health, only half had technical guidelines and adolescent health services coverage was at a low 48% at best. The remaining two components, management and monitoring and evaluation were weak in that most countries did not have comprehensive services or exhibit sustainability.

In general, youth participation occurs and health care for adolescents within services exists in all countries, but there is a need for more adaptation of services to youth needs and expectations. Furthermore, evaluating the existing health services systems, and paying special attention to the management, monitoring and evaluation of health services, is paramount.

## Useful Websites

### WHO

• [www.who.int/child-adolescent-health](http://www.who.int/child-adolescent-health)

### UNFPA

• [www.unfpa.org/adolescents/index.htm](http://www.unfpa.org/adolescents/index.htm)

### UNICEF

• [www.unicef.org/adolescence/index.html](http://www.unicef.org/adolescence/index.html)

### YouthNet

• [www.fhi.org/en/youth/youthnet/ynetindex.html](http://www.fhi.org/en/youth/youthnet/ynetindex.html)

### PAHO

• [www.paho.org/adolescence](http://www.paho.org/adolescence)

### Adolescent Virtual Health Library

• [www.adolec.org](http://www.adolec.org)



### Sources:

\*Adolescent Friendly Health Services: An Agenda for Change. WHO report written by Peter McIntyre, WHO/FCH/CAH/02.14, World Health Organization, 2002, Geneva. <http://www.who.int/child-adolescent-health/publications/>

\*Guidelines for the Provision of Quality Health Services for Young People in the Americas. PAHO draft report written by Rafael Flores, FCH/CA/ADH, Pan American Health Organization, 2004.

\*No authors listed. "Adolescents Get the Picture in Mexico." *JOICFP News*. 1999 Nov;(305):2.

\*UNFPA 1997. <http://www.unfpa.org/about/report/report97/adolesce.htm>