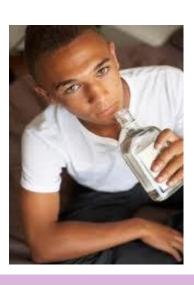




INTERNATIONAL INTERAGENCY MEETING ON ADOLESCENT PREGNANCY IN LATIN AMERICA AND THE CARIBBEAN



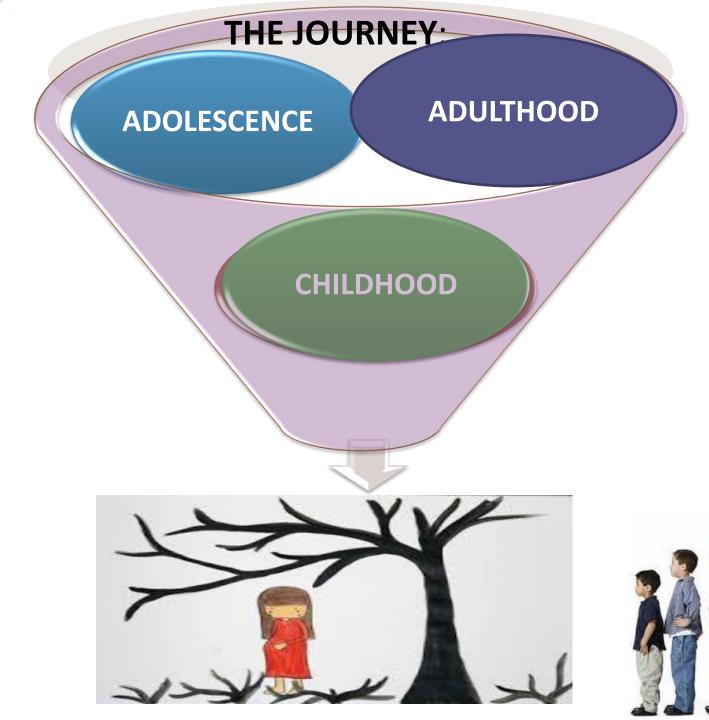
PREVENTING ADOLESCENTS PREGNANCIES IN THE CARIBBEAN



MANAGUA 17 – 19 MARCH 2014 Morella Joseph
Programme Manager – HRD
CARICOM Secretariat









Caribbean: Ages 10 – 24
 represents one third of the total
 population of the region

 Between 18 – 34% of the population is 15 years or younger

 They are shaping social and economic development, challenging social norms and values, and building the foundation of the world's future.



CONCLUSION OF RESEARCH FINDINGS



Caribbean children who were sexually active had their first sexual intercourse before the age of 10 (42.8%) (WHO 2000)

Sexual abuse and exploitation is one of the most common types of abuse in the Caribbean (PAHO, 2001).

In the Caribbean region, CSA and exploitation is an escalating social problem (WHO 2002)

The Caribbean has the earliest age of sexual "debut" in the world (World Bank, 2003)

There is an increasing involvement of both boys and girls in commercial sexual exploitation (IOM, 2005)

Child sexual abuse very often goes unnoticed and is usually surrounded by "a culture of silence and stigma". (UNVAC 2006)

There is clear evidence of a growing market for child sex tourism. (UNICEF 2009)



SEXUAL BEHAVIOUR



Age of first intercourse

	GEN! MALE	DER FEMALE	TOTAL
<10 years	23.5	54.8	42.8
11 - 12	16.4	23.2	20.6
13 - 15	44.7	19.3	28.9
16+	15.3	2.7	7.6



SEXUAL BEHAVIOUR: Number of Sex Partners

	Go Male	ender Female	Age <12	Group 13-15	16-18	Total
1 - 2	72.8	35.7	55.4	46.0	51.3	49.2
3 - 4	14.0	14.9	20.6	22.1	19.3	20.9
5+	13.2	39.5	24.0	31.9	29.4	29 8











Sexual Behaviour

Of the one third of adolescents who have had intercourse, almost half report that their first sexual intercourse was forced.

Over half of sexually active boys and about a quarter of females state that the age of first intercourse was ten years old or younger

Almost two-thirds had intercourse before the age of 13.





MANDATE FROM COHSOD AND ACTION TAKEN



Recommendations of COHSOD XXIII in July 2012 and COHSOD XXIV in May 2013

Identified Adolescent
Pregnancy as a form of
CSA and a Regional
Priority

Technical Meeting convened in 28 – 30 October 2013 in Guyana

Recommended establishment Multisectoral Task Force led by UNFPA; CCS to provide oversight Development of an Integrated Regional Strategic Framework to Reduce Adolescent Pregnancy

High level Consultation on Adolescent Pregnancy on 9 December 2013 in Trinidad and Tobago



The Integrated Regional Framework for the Prevention of Adolescent Pregnancy







THE OVERALL GOAL OF THE FRAMEWORK



To reduce the number of adolescent pregnancies in each country of the English- and Dutch speaking Caribbean by at least 50% within the time-period 2014 – 2017



THE STRATEGIC FRAMEWORK



KEY RESULT AREAS

Outcome 1:

Access to
responsive
sexual- and
reproductive
health services,
information and
commodities:
the framework
proposes

Outcome 2:

Access to age appropriate comprehensive sexuality education

Outcome 3:

Social protection mechanisms for the prevention of all forms of violence against adolescent girls.

Outcome 4:

Legal Standards Outcome 5:

Exchange of knowledge, information and good practices in addressing adolescent pregnancy



- Outcomes will contribute to the objectives of the CARICOM Youth Development Plan (CYDP) 2012-2017, the Regional Framework for Action for Children 2005-2015 and other Caribbean-wide frameworks.
- Outcomes will respond to the recommendations made in the Report of the CARICOM Commission on Youth Development (January 2010).





Outcome 1:

By 2017 all adolescent boys and girls have access to responsive sexual- and reproductive health services, information and commodities.

KEY RESULT AREA

Strengthening and increasing the availability of differentiated and friendly sexual and reproductive health services for adolescents, particularly for 14 years and older without parent consent.



Outcome 2:

Access to age appropriate comprehensive sexuality education

KEY AREA

By 2017 Health and Family Life Education implemented in all schools.

- Sexuality education through informal education modalities to out-of-school adolescents.
- Parenting Education in Sexual and Reproductive Health

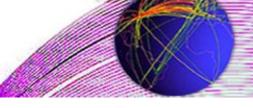




By 2017 all Governments to implement Social protection mechanisms for the prevention of all forms of violence against adolescent Girls especially the poorest and most marginalised



Key Elements



Institutional strengthening and capacity building

Development, implementation and monitoring of community outreach programmes

Empowerment of adolescents, family and communities

Development of positive, safe and responsible social environments in schools and communities

Special social programmes for those most at risk with low socio-economic status



CARICOM MS to share a set of standards for the enactment of legislation that can regulate the ages of marriage, consent, access to contraceptives and sexual and reproductive services.

A common set of standards to sanction and prosecute sex offenders and protect victims of sexual violence

Outcome 4:

By 2017, all Governments to adopt common legal Standards



PROPOSED ACTIVITIES

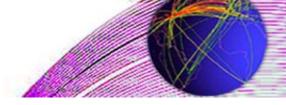
Context

Identification, attention and rehabilitation of victims of sexual abuse and violence

Implementation of norms and standards for safeguarding of anonymity of adolescents, and others

Removing legal barriers, aimed at the standardisation of age of consent for sexual intercourse, child marriage and parental consent for access to services.





Outcome 5:

By 2017, Governments will exchange knowledge, information and good practices in addressing adolescent pregnancy



Integrated Response



 Identify, evaluate and document good practices relating to Adolescent Pregnancy

Intergovernmental collaboration and cooperation

Focus on societal influences, lifestyles and behaviours that promote risky sexual behaviour

 Resources, technology, knowledge and Information sharing Coordinated South-South Collaboration within and outside the Region

Multi-sectoral and multi-stakeholder integrated response



PROPOSED STRATEGIES

Evidence based policy advice and action

Knowledge management to create evidence required for policy advice and action

Design and adjustment to policies, programmes, laws and implementation mechanisms based on analysis

New courses in tertiary education for personnel in these sectors

Capacity building in the health, education, child and social protection sectors



Implementation Mechanisms

COUNTRY-LEVEL

Establishment of a National Multi-Sectoral Commission

Establish a country level baseline for each of the indicators

Monitoring, Evaluation,
Coordination,
identifying best
practices and
Reporting

CARICOM-LEVEL

Standardisation of laws, policies and programmes

Oversee and review the annual country reporting on progress for discussion at policy and technical meetings

Function as knowledge broker for South-South Collaboration

 Extensive collaboration with International Organisation



Best Practices

1. Early Childhood Interventions

 provide enhanced educational and social support in the early years of life

2. Youth Development:

 engage and provide young people with skills and educational opportunities that will help them succeed as adults and develop career aspirations.

3. Involvement of Family and Other Caring Adults:

affects an adolescent sexual behavior
 and the risk of early pregnancy.



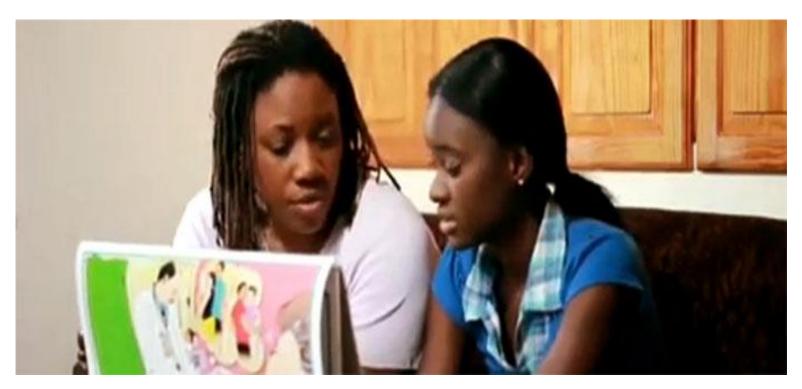








Jamaica Offers a Model for Preventing Adolescent Pregnancies while Supporting Young Mothers



Talking to adolescents about sex can make for important but sometimes uncomfortable conversations.

"Women's Centre of Jamaica Foundation and WAD of Guyana"



Best Practices

4.Boys and Male Involvement:

- males play a critical role in unintended and early pregnancies, and should be involved in efforts to prevent adolescent pregnancy
- CariMan (empowerment of boys and men)



5. Cultural Relevant

 culture plays a critical role in influencing values and attitudes about sex, child bearing, and parenting - interventions will increase the effectiveness of efforts





CaribMAN: Caribbean Male Action Network (12 Countries)



 Training sessions to address issues such as Violence and Life Planning

To provide a forum for discussion on Masculinity, sexual diversity, relationships

Create
Champions for
Change network
to combat
violence against
women.

 Sensitization sessions on gender roles Design and develop interventions to facilitate communication around manhood

To share best practices.

Best Practices







7. Service Learning:

- connects meaningful community service with academic learning, civic responsibility, and personal growth.

8. Increasing Employment

 Opportunities for adolescents is necessary to assure economic selfsufficiency, generate self-esteem, and create the motivation to delay early childbearing.

9. Access to Reproductive Health Services

- The sexually active need support and encouragement to use contraception effectively and consistently.



Immediate Next Steps

 -Familiarization of Monitoring and Evaluation e-Instrument

- Development of Model legislation

National and Regional Implementation Plans to be developed

-Workshop to develop Consolidated Framework on 6 – 8 May 2014

- Review of the Data

Collate information received from Member States on Framework

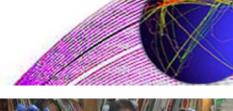




Approach in addressing Adolescent Pregnancy: holistic, flexible, multi-faceted, multi-disciplinary and multi-sectoral.

Strategy should target the home, school, community, youth leaders, media, policy makers, adolescent girls especially the marginalised and high risk, multi-sectoral programmes to include life skills education, sexual and reproductive health, education, employment and legislation.











THANK YOU



