

Symposium IV – Challenges in Adolescents: Have We Addressed?

Reducing teenage pregnancy – current status and future challenges

Dr. Ramya Pathiraja

There are more than 20,780 girl children aged 12- 17 years in Sri Lanka who are married or in cohabiting relationships and often have children before they reach 18 years of age. Compared to South East Asian countries, teenage pregnancy in Sri Lanka is relatively low. In 2006 it was about 6% with a steady decline and in 2014 this was 4.9%. Positive developments include, increase in the number of hospital-based contraceptive and sexual and reproductive health (SRH) services, training of teachers, and support staff on SRH and life skills, early intervention to identify young people at risk of teenage pregnancy and appointing committees to follow up the children who drop out of school and identify children with special needs who are at risk of unsafe sexual activities. Over the past decade there has been a significant progress with a steady decline in national teenage pregnancy rate with a wide variation in progress between districts but also missed opportunities and disappointments. There are considerable variations in the percentage of teenage pregnancies registered in the country. The Eastern province had the highest teenage pregnancy rate of 10.2% while Central province had the lowest rate of 4.1%. The Trincomalee District had the highest rate of teen pregnancy (13.8%) while the Kegalle District had the lowest rate (1.2%). There is a decline in the teenage pregnancy rates in all-ethnic groups except Moors, not showing a consistent pattern. Unmet need of contraception is high among this age group. There are significant barriers in the introduction of comprehensive sexuality education into the curriculum due to sociocultural conservatism. There are many obstacles experienced by unmarried young people in accessing FP services. The facility infrastructure that exists in "youth friendly clinics" does not ensure comfort, confidentiality, and privacy. There is a need to prioritize the teenage pregnancy prevention programme. To maintain the current downward trend in teenage pregnancy, existing provision of allocation of funds must be reviewed. The challenge now is how to sustain and build on that progress in a time of limited resources.

Psychological aspects of substance abuse among children

Dr. Sudarshi Seneviratne

Most people will experiment with AODs (alcohol and other drugs) for the first time during adolescence, and some will continue to use AODs throughout adolescence and into adulthood. Researchers and clinicians now have a better understanding of the factors that increase the risk of AOD use in adolescence and contribute to its continuation and escalation. Adolescence is a dynamic period characterized by changes in many realms (e.g., physical, emotional, hormonal, and psychological), including AOD use experience. Therefore, it is important that this period be viewed not as a single "snapshot" of development, but rather as a period when risk factors for AOD use can and will change in their relative impact over time. Literature suggests that peer influences and environmental influences are especially important in early adolescence and in the initiation of AOD